

*State of Idaho*  
**DEPARTMENT OF INSURANCE**

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**NOTICE OF CHANGE OF OWNERSHIP**

*Open this form in Adobe Acrobat if you would like to use the digital signature and submit button.*

*Per §41-1008(6), a business entity licensed as a producer shall inform the director of any change in ownership.*

Date: \_\_\_\_\_ Idaho License # or NPN: \_\_\_\_\_ FEIN#: \_\_\_\_\_

Business Entity Name: \_\_\_\_\_

\*NOTE: If this change of ownership results in:

1. A **change of name** for the listed entity. The Name Change, Business Entity form will need to be submitted in addition to this form.
2. A **change of FEIN**. DO NOT SUBMIT THIS FORM. You will need to apply for a new business entity license and request a merger of the existing license (non-survivor) into the newly-created license (survivor). This will result in active appointments and registrations transferring to the new entity.
3. A **change of officers**. A Change of Officer form will need to be submitted.

Former Owner: \_\_\_\_\_

New Owner: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Officer of Firm or Authorized Individual*

Printed Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Questions? Please contact Producer Licensing [agent@doi.idaho.gov](mailto:agent@doi.idaho.gov)

**SUBMIT**