

How to Apply for a Resident Independent Adjuster License.

An Independent Adjuster is a person who, on behalf of the insurer, investigates and negotiates settlement of claims arising under insurance contracts.

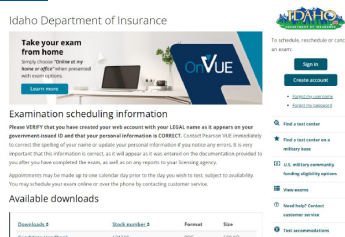
Step 1. Study for the Licensing Exam.

- Idaho does not require pre-licensing education., however, we strongly recommend reviewing the [content outline](#) for the line of authority you wish to carry.
- The Department does not provide study material for the exam. A list of third party entities who do provide study material can be found on our [web site](#).

Step 2: Decide where you want to take your licensing Exam

- Idaho has partnered with Pearson Vue to facilitate its testing needs.
- Tests can be taken at Pearson Vue testing locations or remotely via an online proctor. For a full list of Idaho locations [click here](#).

Step 3: Go to the [Idaho Department of Insurance' Pearson Vue page \(https://home.pearsonvue.com/id/insurance\)](https://home.pearsonvue.com/id/insurance) to register for the exam.



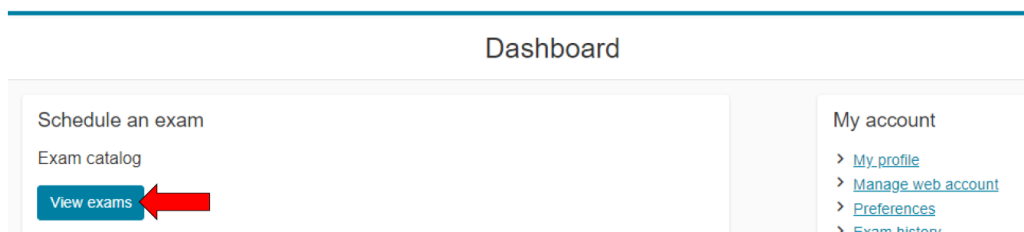
Step 4: Click "Sign in". Note: If you do not have a Pearson Vue account you will need to select "Create and account" and set one up.



Step 5. Enter your log in information and click "Sign In".

A screenshot of the Pearson Vue sign-in form. The form has a 'Sign in' heading and a security notice. It includes a 'Returning users, please sign in:' section with fields for '* Username:' and '* Password:' (with a 'Show password' checkbox) and a 'Sign In' button. A red arrow points to the 'Sign In' button. There is also a 'New users, please sign up:' section with a 'Create a web account.' link.

Step 6. In the "Schedule an Exam" box click "View exams".



Step 7. Click on “Idaho Independent Adjuster”.

Find an exam

Find an Exam:

Exam Code	Exam Name
InsID-AH0002	Idaho Disability/Health Producer
InsID-BB0006	Idaho Bail Bonds
InsID-Cas0004	Idaho Casualty Producer
InsID-FPELC	ID Electronic Fingerprint
InsID-FPHC	ID Fingerprint Hard Card
InsID-IndAdj0009	Idaho Independent Adjuster
InsID-Life0001	Idaho Life Producer
InsID-Pers0005	Idaho Personal Lines Producer
InsID-Prop0003	Idaho Property Producer
InsID-PubAdj0007	Idaho Public Adjuster
InsID-Sur0008	Idaho Surety Producer

Step 8. If you want to take your exam in a test center click “In person at a test venter” if you want to take it remotely click “OnVUE Online With OnVUE”

Select exam options

InsID-AH0002: Idaho Disability/Health Producer

How do you want to take your exam?

In person at a test center

OnVUE Online with OnVUE

Step 9. Review the information and click “Next”.

Your photo ID

We'll verify your government-issued identification (ID) when you arrive for your exam. Review [admission & ID policies](#).

What to expect

Familiarize yourself with the testing experience so you feel confident on test day. Watch our [short video](#).

Personal items

Review the items that you can have during testing that do not require prior approval. View [comfort aid list](#).

Questions?

Check out the [FAQs](#).

Step 10. If you are having your fingerprints taken at the Pearson Vue testing center click “Add another exam to take on the same day” and repeat steps 7-9, Selecting “InsID-FPELC “ as the exam, other wise click “Next”.

Confirm exam selection

InsID-AH0002: Idaho Disability/Health Producer
Language: English

Consecutive Appointments

You may add one or more exams to take on the same day. [Tell me more](#).

Step 11. Review the information and click “Agree”.

Agree to Idaho Department of Insurance policies

IdID-AH1002 - Idaho Disability/Health Protocol

Idaho Department of Insurance policies

Admission Policy

We ask that you arrive at the test center 15 minutes before your scheduled appointment time. This will give you adequate time to complete the necessary sign-in procedures. If you arrive more than 15 minutes late for your appointment, you may be refused admission and the exam fees will be forfeited.

You will be required to present one form of original (not photocopies), valid (unexpired) government issued ID that includes your name, photograph and signature. The first and last name that you used to register must match exactly the first and last name on the ID that is presented on test day. All IDs required must be issued by the country in which you are testing. If you do not have the qualifying ID issued from the country you are testing in, an International Travel Passport from your country of citizenship is required. If you have any questions or concerns about the ID you are required to bring with you to the testing center for admittance for your exam please contact Pearson VUE customer service at info@thepearsonvue.com/Test/SelectCustomerService.aspx. To view the full ID policy, including any additional allowances to this policy, please visit <http://www.pearsonvue.com/bokeidc1.pdf>.

Reschedule Policy

You must contact Pearson VUE or access your online Pearson VUE account to reschedule your exam at least a minimum of 48 hours prior to your appointment. Exams cannot be rescheduled less than 48 hours prior to your appointment. Failure to reschedule in time or failure to appear for your appointment will result in the forfeiture of your exam fee.

Cancellation Policy

You must contact Pearson VUE or access your online Pearson VUE account to cancel your exam at least a minimum of 48 hours prior to your appointment. Exams cannot be canceled less than 48 hours prior to your appointment. Failure to cancel in time or failure to appear for your appointment will result in the forfeiture of your exam fee.

[Previous](#) [Agree](#)

Step 12. Select your testing center and click “Next”. If you are you fingerprinting at your testing center you will only have three options, Boise, Pocatello and Spokane.

You can select up to three test centers to compare availability.

Helpful hints:

- The test center information link may provide directions, parking, wheelchair support or other physical access considerations.
- Distance (mi/km) is a straight line calculated from the center point of your search criteria and does not reflect driving distance.

Test Center	Distance
	Show km
<input type="checkbox"/> Pearson Professional Centers-Boise ID 9183 W Black Eagle Dr Boise, Idaho 83709 United States Test Center Information	0.7 mi
<input type="checkbox"/> Pearson VUE Test Center-Pocatello ID 812 East Clarke Street Suite E ReMax Building Pocatello, Idaho 83201 United States Test Center Information	200.4 mi
<input type="checkbox"/> Pearson Professional Centers-Spokane WA 1410 N Mullan Rd Suite 203 Mullan Centre Spokane Valley, Washington 99205 United States Test Center Information	4.5 mi

[Next](#)

Step 13. Click on the day and time you want to take your exam then click “Book this appointment”.

The page BEFORE you have selected a date

ZFP_ID RE and APP Hardcard
11250 Avenida High View Rd
Driftwood, Texas 78619
United States

[Find another test center](#)

Select a date from the calendar. Only dates with appointment availability can be selected.

September 2023

Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

[Why can't I find an available appointment?](#)

[Previous](#)

13a. Select a day.

The page AFTER you have selected a date

ZFP_ID RE and APP Hardcard
11250 Avenida High View Rd
Driftwood, Texas 78619
United States

[Find another test center](#)

Select a date from the calendar. Only dates with appointment availability can be selected.

September 2023

Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

[Why can't I find an available appointment?](#)

2. Select your appointment start time

How would you like times displayed?

12 hr (e.g., 2:00 PM) 24 hr (e.g., 14:00)

Our next available appointment is:

Thursday, September 14, 2023

2:30 PM - 3:30 PM America/Chicago - CDT

[Explore more times](#) [Book this appointment](#)

13b. Select a time.

Step 14. Review the information on this screen to ensure you have selected the correct options. If everything looks correct click “Proceed to Checkout”.

Cart

[Review and confirm](#) contact information to avoid issues on test day.

Description	Details	Price	Actions
Exam InstID-AH0002: Idaho Disability-Health Producer	Appointment Monday, October 9, 2023 Start time: 9:00 AM America/Boise - MDT Change Appointment	65.00	Remove
Exam Modules: <ul style="list-style-type: none">GE-Health70PCT: General HealthID-Health: Idaho Health Language: English Length: 120 minutes	Location Boise State Proctoring and Certification Services Chroway Annex II 1405 Chroway Dr. Boise, Idaho 83706 United States Change Test Center		

[Add Another Exam](#)

Confirm contact information

IMPORTANT: Your first/given and last/surname/family name must match exactly as it appears on the identification (ID) that is presented at the time of testing. If there is not an exact match, you will not be able to take your test and you will not be reimbursed for any fees paid.

Name:
Stacy Gobie
[Edit](#)

Telephone:
+1 208-334-4250

Total Due

Subtotal:	65.00
Estimated Tax:	0.00
ESTIMATED TOTAL DUE:	USD 65.00

You can enter voucher/promotion codes on the billing screen.

ESTIMATED TOTAL DUE: USD 65.00 [Proceed to Checkout](#)

Step 15. Complete the payment process. Note: If the site is not accepting your payment please contact Pearson Vue at 800-274-2721

Step 16. Take your exam when and where you signed up for.

Step 17. Have your fingerprints taken for a background check.

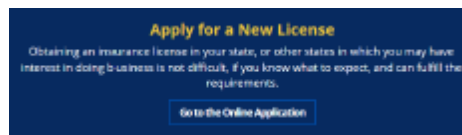
17a. If you are having your fingerprints taken at the testing center you will have them taken at the same time as testing. No further action is needed for fingerprinting.

17b: If you are **NOT** having your fingerprints taken at the testing center please [click here to download the instructions for the mail in \(hard card\) finger print process](#) you will have them taken at the same time as testing.

Step 18. Apply for a license using [NIPR](#)

- Once you have passed the exam and submitted your fingerprints you will need to go to [NIPR.com](#) and apply for a License
- While you can use third party application to apply such as Sircon, the Department can not help you if there is any issues with the transaction, up to and including refunds.

Step 19. Click on “Go to Online Application”.



Step 20. Click on “Individual”.



Step 21. Enter the identifying information and click “Next”.

Identify Licensee
Individual

Search Type

- License Number
- National Producer Number (NPN)
- Social Security Number (SSN)

Select one identifier above

Please select a search type

I accept the NIPR Use Agreement

Back Next

Step 22. Select the license type wish to apply for have then click “Next”.

User Menu

Start Message Center

Step 23. Select the Adjuster Licensing, Initial and Resident and click “Next”.
You may see more options than pictured, you can ignore them.

Select Product

Product Type

- Producer Licensing
- Adjuster Licensing
- Other Licensing
- Contact Change Request (Change Address, Phone, or Email)
- PDB Detail Report

Application Type

- Initial
- Renewal
- Add Line Of Authority

Residency Type

- Resident
- Non-Resident
- Non-Resident (No Home State)

Back Next

Step 24. Select “Idaho” from the list and click “Next”.

Select a State

Search

IDAHO Select

Back Next

Step 25. Select “Independent Adjuster” and click “Next”.

Insurance Producer

- Accident & Health or Sickness Select All Deselect All
- Casualty
- Life
- Personal Lines
- Property
- Variable Life and Variable Annuity
- Credit
- Surety
- Travel
- Pet

Bail Bond Agent

- Bail Bond Agent Select All Deselect All

Independent Adjuster

- Independent Adjuster Select All Deselect All

Public Adjuster

- Public Adjuster Select All Deselect All

Back Next

Step 26. Verify your selections and the fee.

IDAHO

Edit

INDEPENDENT ADJUSTER

State Fee	\$80.00
NIPR Fee	\$5.60

Total State Fees \$80.00
Total NIPR Fees \$5.60
Grand Total \$85.60

This is an estimate. Exact fees will be shown before payment.

Back Next

Step 27. Enter all required information in each section and click “Next”. Each next will take you to the next section.

← **Biographic Data**

Last Name

First Name

▲ First Name is a required field

Middle Name

Optional

Suffix

optional

Gender Male Female

Date of Birth

Are you a citizen of the United States? Yes No

If applicable, FINRA Individual CRD

Optional Only Financial Industry Regulatory Authority (FINRA) numbers are allowed

Addresses Next →

Phone Contact Data

Web Information

Affiliations

Background Questions

Step 28. Review the information for errors and click “Next”.

Biographic	First Name: JANE Middle Name: DOE Last Name: DOE Suffix: FEMALE Date of Birth: 06/13/1983 Are you a citizen of the United States? YES If applicable, FINRA Individual Central Registration Depository (CRD):	Aliases Do not enter for this section.
Resident Address	Address Line 1: 123 MAIN ST. City: BOISE State: ID Zip Code: 83709 Country: UNITED STATES OF AMERICA	Employment History # From To Employer Position City Country State 1 Apr 2018 Apr 2023 Test Test United States Of America Idaho
Business Address	Address Line 1: 123 MAIN ST. City: BOISE State: ID Zip Code: 83709 Country: UNITED STATES OF AMERICA	Affiliations Do not enter for this section.
Mailing Address	Address Line 1: 123 MAIN ST. City: BOISE State: ID Zip Code: 83709 Country: UNITED STATES OF AMERICA	Background Questions Responses
Phone Contact Data	Business Phone: (208)555-5555 Home Phone: (208)555-5555	<p>1. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>2. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>3. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>4. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>5. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>6. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>7. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>8. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>9. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>10. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>11. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>12. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>13. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>14. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>15. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>16. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>17. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>18. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>19. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>20. Do you currently own or lease a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
Web Contact Info	Personal Email: FAKE@FAKE.COM Business Email: FAKE@FAKE.COM Web Address: FAKE.COM Business Entity Name: FAKE BUSINESS LLC	

Step 29. Answer the question and click “Next”.

Authorized Submitter

I am submitting for: Myself Someone else

← Back Next →

Step 30. Read the attestation and click “I accept” then click “Next”.

Attestation HAMMOND, FLESHMAN, DAWN ANN

Read carefully and Accept to continue.

- I hereby certify that, under penalty of perjury, all of the information submitted in this application and attachments is true and complete. I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license revocation or denial of the license and may subject me to civil or criminal penalties.
- Unless provided otherwise by law or regulation of the jurisdiction, I hereby designate the Commissioner, Director or Superintendent of Insurance, or other appropriate party in each jurisdiction for which this application is made to be my agent for service of process regarding all insurance matters in the respective jurisdiction and agree that service upon the Commissioner, Director or Superintendent of Insurance, or other appropriate party of that jurisdiction is of the same legal force and validity as personal service upon myself.
- I further certify that I grant permission to the Commissioner, Director or Superintendent of Insurance, or other appropriate party in each jurisdiction for which this application is made to verify information with any federal, state or local government agency, current or former employer, or insurance company.
- I further certify that, under penalty of perjury, a) I have no child-support obligation, b) I have a child-support obligation and I am currently in compliance with that obligation, or c) I have identified my child support obligation arrearage on this application.
- I authorize the jurisdictions to which this application is made to give any information concerning me, as permitted by law, to any federal, state or municipal agency, or any other organization and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
- I acknowledge that I understand and will comply with the insurance laws and regulations of the jurisdictions to which I am applying for licensure.
- I hereby certify that upon request, I will furnish the jurisdiction(s) to which I am applying, certified copies of any documents attached to this application or requested by the jurisdiction(s).

I accept

← Back Next →

Step 31. Enter the e-mail(s) you want the transaction receipt to go to and click “Next”.

Verification Contact

Your receipt and any additional information about this transaction will be sent to the following email addresses.

Email Required

Email Optional

Email Optional

Email Optional

← Back Next →

Step 32. Verify the transaction information and click “Submit and Pay”.

Submit Requests					
The following states will be sent the requests made during this session.					
State	Description	State Fee	NIPR Fee	Fee Summary	
IDAHO	Independent Adjuster • Independent Adjuster	\$80.00	\$5.60	Total State Fees	\$80.00
				Total NIPR Fees	\$5.60
				Grand Total	\$85.60

• Fees are not refundable
• Allow up to 5 days for changes to display on PDB
Requests are not complete until payment is made. Please click the Submit & Pay button.

◀ Back Submit & Pay ▶

Step 33. Enter the payment information and click “Next” until the transaction is done.

Choose Payment Type

How would you like to pay?
 Credit Card
 Electronic Check

Billing Details
* = Required

* First Name:
* Last Name:
* Address Line 1:
Address Line 2:
Address Line 3:
* City:
* State or Province:
* Country: United States of America
* Zip Code:
* Phone:

Your Total is: \$85.60

◀ Back Next ▶

Step 34. Click “I Agree”. Enter your payment information and click “Submit \$___ Payment”.
Fee’s will not be refunded by either NIPR or the Idaho Department of Insurance.

User understands all fees are non-refundable.
 I Agree

Submit \$85.60 Payment

Back Cancel

Card Number
MM / YY CVC

User understands all fees are non-refundable.
 I Agree

Submit \$85.60 Payment

Back Cancel

Step 35. E-mail the required additional documents to agent@doi.idaho.gov or up load them to the document warehouse.

- Copy of Pass Slip(s) from Exam(s)
- Copy of Fingerprinting confirmation from Pearson VUE
- CHRI Request and Release form