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Renewal Application for an Independent Review Organization

This form is for the renewal of the Independent Review Organization listed below. Instructions:

1. Fill out this form in its entirety.
2. Prepare a check or money order for \$300 made payable to the Idaho Department of Insurance for the non-refundable renewal fee.
3. Make a copy of your current URAC Certificate.
4. Mail the completed form, the current URAC Certificate and payment to:

Idaho Department of Insurance
700 W State St Fl 3
PO Box 83720
Boise ID 83720-0043

Date: _____ License Number: _____ FEIN: _____

Name of IRO: _____

Business Name: _____

Business Address: _____
No PO Boxes

Mailing Address: _____
Same as Business Address

Business Phone Number: _____ Ext.: _____ Toll Free Number: _____

Fax Number: _____ E-Mail Address: _____

Contact Name: _____ Contact Email: _____

Signature of Officer of the Firm: _____

Printed name of Officer: _____

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