

CERTIFIED DOCUMENT / PUBLIC RECORDS REQUEST

APPLICANT INFORMATION

| | |
|-------------------------|--|
| REQUESTED BY: | |
| MAILING ADDRESS: | |
| DATE REQUIRED | |

REQUESTED COMPANY INFORMATION

| | | | |
|----------------------|--|-------------------|--|
| NAIC NO. | | C OF A NO. | |
| COMPANY NAME: | | | |

| CERTIFIED DOCUMENT | QTY | FEE | TOTAL |
|---|-----|----------|-------|
| Certificate of Deposit | | \$20 ea. | |
| Certified Copy of Certificate of Authority | | \$50 ea. | |
| Certificate of Compliance | | \$20 ea. | |
| Certified Copy of Articles of Incorporation | | \$20 ea. | |
| Certified Copy of Annual Statement | | \$20 ea. | |

| COPY PAGES | QTY | FEE | TOTAL |
|-----------------|-----|------------|-------|
| First 100 Pages | | FREE | FREE |
| Pages after 100 | | \$0.05 ea. | |

TOTAL AMOUNT DUE \$ _____

Per Idaho Department of Insurance Rules, IDAPA 18.01.44.011, the fee must be paid in advance by check payable to the Department of Insurance.

Checks made payable to: *Idaho Department of Insurance*

Please submit the completed form and payment to:

Idaho Department of Insurance
Examinations Section
700 West State Street, 3rd Floor
P.O. BOX 83720
Boise, ID 83720

All other certified documents or questions, please contact Carol Anderson in examinations section via e-mail: carol.anderson@doi.idaho.gov