



STATE OF MAINE  
 DEPARTMENT OF PROFESSIONAL  
 AND FINANCIAL REGULATION  
**BUREAU OF INSURANCE**  
 34 STATE HOUSE STATION  
 AUGUSTA, MAINE  
 04333-0034

## Maine Bureau of Insurance Business Entity or Individual Address Change Form

**Notification of change in Business Address:** In accordance with 24-A MRSA §1419, it is the obligation of the licensee to notify the superintendent of changes in **business** address within 30 days. Failure to do so results in the automatic imposition of a penalty.

**Note:** Address changes can now be done electronically on our website, or through the National Insurance Producer Registry at nipr.com.

If the business entity (agency) is changing its address, please enclose a list of Maine licensed individuals whose addresses are affected by the change. **No fee** is required to change an address.

**Name** (Individual or Business Entity): \_\_\_\_\_

**Name & Phone #** (Person Completing this form): \_\_\_\_\_

FEIN/Social Security #	Maine License #
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**Business Mailing Address** (for Business Entity or Individual)

**Note:** Business addresses are displayed on the Internet.

Business Name			
PO Box	Business Street Mailing Address	E-mail Address	
City	State	Zip Code	Business Phone Number

**Individual Home Mailing Address**

PO Box	Street Mailing Address	E-Mail Address	
City	State	Zip Code	Home Phone Number

If you have any questions, please contact: Patricia Thomson Phone #: (207) 624-8414

**Mail to:** Maine Bureau of Insurance  
 34 State House Station  
 Augusta ME 04333-0034

You may Fax the form to: (207) 624-8599 or E-mail to: Patricia.M.Thomson@maine.gov

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OFFICES LOCATED AT 124 NORTHERN AVENUE, GARDINER, MAINE 04345

[www.maine.gov/insurance](http://www.maine.gov/insurance)

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