



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): _____

| | |
|------------------------|-----------------|
| FEIN/Social Security # | Maine License # |
|------------------------|-----------------|

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 | |

Name & Phone # (Person Completing this form): _____

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 76 NORTHERN AVENUE, GARDINER, MAINE 04345
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