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| maine_seal | **STATE OF MAINE****Bureau of Insurance** | Financial Analysis DivisionMaine Bureau of Insurance |
| **Overnight delivery:** Deliveries such as FedEx and UPS76 Northern Ave.Gardiner, ME 04345. | USPS Express overnight deliveries 34 State House StationAugusta, ME 04333. |

Risk Purchasing Group Registration

a $100 registration fee is due with your application

--Please Make Payable to Treasurer State of Maine--

|  |  |  |
| --- | --- | --- |
| 1. Name of Risk Purchasing Group: | 2. Legal State | 3. FEIN/SSN (if none indicate N/A) |
| 4. Business Mailing Address: | 5. Contact person:Phone #Email:  |
| 6. Street Address, if different from Mailing Address: |
| 7. Specify lines and classification of liability insurance that this purchasing group intends to purchase: |
| 8. Please provide a description of the method by which the referenced liability insurance will be offered topurchasing group members with Maine risks: |
| 9. List the Maine licensed insurance company(ies), eligible surplus lines carrier(s), or Risk Retention Group(s)from which the purchasing group intends to purchase insurance:(1) (3) (2) (4)  |
| 10. Maine licensed producers transacting business on behalf of the purchasing group: (producer must be an individual, not an agency*)*Name: ME. Lic# Name: ME. Lic#  |
|  |
| **PURCHASING GROUPS DOMICILED IN MAINE:**11. Describe business or activities which are similar or related with respect to the liability to which members of thePurchasing Group are exposed. |

I hereby state that all the information presented herein is true and correct and that I am authorized to sign for and act on behalf of the Purchasing Group.

*The Risk Purchasing Group* ***is not considered registered*** *until notified by the Superintendent that it has met all statutory requirements to be considered registered in Maine*

 Name (Please type or print)

 Title

 Updated: 5/24/2017 Signature