



State of New Jersey
 DEPARTMENT OF BANKING AND INSURANCE
 LICENSING SERVICES BUREAU - INSURANCE
 PO Box 327
 TRENTON, NJ 08625-0327

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Business Entity Registration to Negotiate Viatical Settlement Contracts
 (Please Print or Type)

Pursuant to N.J.S.A. 17B:30B-3: No person or business entity, unless a licensed viatical settlement provider, shall act on behalf of a viator residing in New Jersey unless that person is a life insurance producer licensed in New Jersey and has notified the Commissioner and paid the appropriate fees not less than 30 days from the first date of negotiating a viatical settlement on behalf of a viator. Please complete the following information and return it with the fees indicated to the address on this registration form. Once processed, the registration remains in effect as long as the NJ Life Producer License is in good standing.

Federal Employer Identification No. (FEIN)	New Jersey Life Producer # (for business entity)	National Producer #		
Business Entity Name				
Business Address (Physical Location)			PO Box	
City	State	Zip Code	Email Address	
Phone #	Fax Number		Website Address	
Mailing Address		City	State	Zip Code
List any name other than the legal business name under which you are doing business				
Designated Responsible Licensed Producer				
At least one licensed life insurance producer who is registered to negotiate viatical settlement transactions in this State must be listed and is responsible for the business entity's compliance with the insurance and viatical laws and regulations of this State.				
Name _____	NJ License # _____	SSN _____		
Name _____	NJ License # _____	SSN _____		
Name _____	NJ License # _____	SSN _____		
Identify all owners with 5% or more interest or voting interest, partners, officers and directors of the business entity:				
Name: _____	Date of Birth _____	SSN _____	Owner? Y N	
Name: _____	Date of Birth _____	SSN _____	Owner? Y N	
Name: _____	Date of Birth _____	SSN _____	Owner? Y N	
Use additional sheet if necessary				
List the Viatical Providers with whom you will be transacting business				
Viatical Provider _____				
Viatical Provider _____				
Viatical Provider _____				

Attach copies of all viatical settlement contract forms, application forms and disclosure statements used in negotiating viatical settlements with viators residing in New Jersey that have not been previously approved by the New Jersey Department of Banking and Insurance. Pursuant to N.J.S.A. 17B:30B-5, a person shall not use a viatical settlement contract form or provide a disclosure statement or application form to a viator in this State unless it has been filed with and approved by the commissioner.

1.) Since the last renewal of your life producer license in this state, or if you have not yet renewed, since the time of application, has the business entity or any owner, partner or director been convicted of, or is the business entity or any owner, partner or director currently charged with, committing a crime, whether or not adjudication was withheld? Yes ____ No ____
“Crime” includes a misdemeanor, disorderly person, felony or a military offense. You may exclude misdemeanor traffic citations and juvenile offenses. “Convicted” includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence or a fine.

If you have a felony conviction, have you applied for a waiver as required by 18 USC 1033? N/A ____ Yes ____ No ____

If yes, was that waiver granted? (Attach copy of 1033 waiver approved by home state.) N/A ____ Yes ____ No ____

If you answer yes, you must attach to this application:

- a) a written statement explaining the circumstances of each incident,
- b) a certified copy of the charging document
- c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment

2.) Since the last renewal of your life producer license in this state, or if you have not yet renewed, since the time of application, has the business entity or any owner, partner or director been involved in an administrative proceeding regarding any professional or occupational license? Yes ____ No ____

“Involved” means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, being placed on probation or surrendering a license to resolve an administrative action. “Involved” also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license. “Involved” also means having a license application denied or the act of withdrawing an application to avoid a denial. You may exclude terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

If you answer yes, you must attach to this application:

- a) a written statement identifying the type of license and explaining the circumstances of each incident,
- b) a certified copy of the Notice of Hearing or other document that states the charges and allegations, and
- c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment.

3.) Since the last renewal of your life producer license in this state, or if you have not yet renewed, since the time of application, has any demand been made or judgment rendered against the business entity or any owner, partner, officer or director for overdue monies by an insurer, insured or producer? Yes ____ No ____

If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment.

4.) Since the last renewal of your life producer license in this state, or if you have not yet renewed, since the time of application,, has the business entity or any owner, partner, officer or director a party to, or been found liable in a lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? Yes ____ No ____

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident,
- b) a certified copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, and
- c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment.

Certification and Attestation

The undersigned owner, partner, officer or director of the business entity hereby certifies under penalty of perjury that:

- 1.) All of the information submitted in this registration and attachments is true and complete. I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license/registration revocation or denial of the license or registration and may subject me to civil or criminal penalties.
- 2.) Where required by law, the business entity hereby designates the Commissioner of Banking and Insurance to be its agent for service of process regarding any cause of action or legal proceedings arising within this State out of transactions under this registration and agree that service upon the Commissioner or other appropriate party of that jurisdiction is of the same legal force and validity as personal service upon the business entity.
- 3.) The business entity grants permission to the Commissioner of Banking and Insurance, or designee to verify information with any federal, state or local government agency, current or former employer, or insurance company.
- 4.) Every owner, partner, officer, director or designated responsible producer of the business entity does not have a child-support obligation, or has a child-support obligation and is currently in compliance with that obligation or we have attached a disclosure of the details of the child support obligation and arrearage to this registration.
- 5.) The business entity and I authorize the NJ Department of Banking and Insurance to give any information concerning the business entity, its officers, directors, partners, owners and designated responsible producers, as permitted by law, to any federal, state or municipal agency, or any other organization and I release the NJ Department of Banking and Insurance and any person acting on its behalf from any and all liability of whatever nature by reason of furnishing such information.
- 6.) **I acknowledge that I understand and the business entity will comply with the insurance laws and regulations of the State of New Jersey and will operate in accordance with the provisions of the Viatical Settlements Act, N.J.S.A. 17B:30B-1 et seq.**

Must be signed by an officer, director, owner or partner of the business entity

_____ Date

Signature

Print full legal name

Title

Address

_____ City State Zip Code

Fees: Attach one check or money order made payable to "State of New Jersey Treasury"

Registration fee: \$100 Processing fee (non-refundalbe): \$20 = **\$120.00 Total**