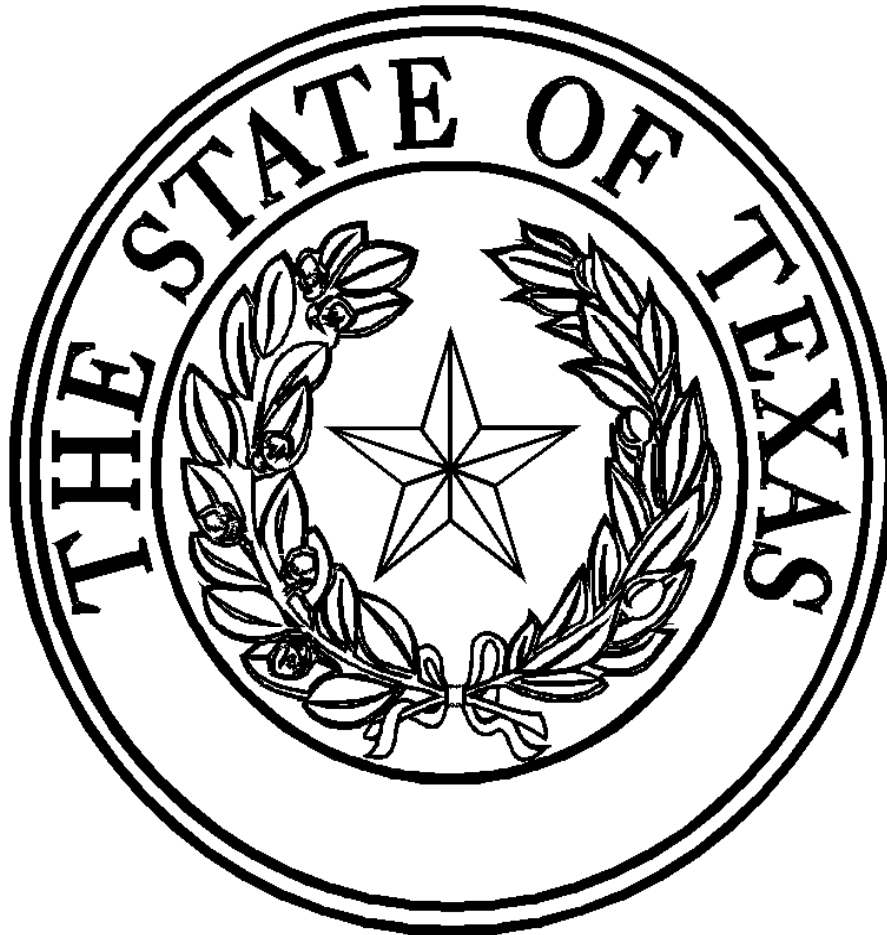


TEXAS DEPARTMENT OF INSURANCE

APPLICATION FOR TEXAS TITLE INSURANCE AGENT'S LICENSE  
(LONG FORM)



Mail to: Regular Mailing Address  
Texas Department of Insurance  
Title Division, Mail Code 106-2T  
P. O. Box 149104  
Austin, Texas 78714-9104

Overnight Mailing Address  
Texas Department of Insurance  
Title Division, Mail Code 106-2T  
333 Guadalupe Street  
Austin, Texas 78701

Refer Questions To: (512) 322-3482

## INSTRUCTIONS

**A. SOLE PROPRIETORSHIP** - the following must be submitted:

- Section A for the sole proprietor and manager, if other than sole proprietor.
- A completed fingerprint card for the sole proprietor.
- Section B completed by applicant. (The name on Section B must appear as: Sole owner's name dba Trade Name.)
- Section C completed by the sponsoring title insurance company.
- Copy of a valid Assumed Name Certificate filed in the county(ies) in which the title agent will operate.
- Non-refundable license fee of \$50.00.
- Title Insurance Agent's Bond or in lieu thereof a cash deposit or irrevocable letter of credit issued by a financial institution in this state insured by an agency of the United States Government (or securities approved by the Department) in the sum of the greater of ten thousand dollars (\$10,000.00) or an amount equal to ten percent (10%) of the gross premium written by the agent in accordance with the latest statistical report to the Department but not to exceed one hundred thousand dollars (\$100,000.00). (The Principal name on the Bond must appear as: Sole owner's name dba Trade Name.)

**B. PARTNERSHIP** (general or limited) - the following must be submitted.

- Section A for each partner and manager, if other than a partner.
- A completed fingerprint card for each individual partner.
- Section B completed by applicant title agent. (The agent name on Section B must appear as: Names of all partners dba Trade Name.)
- Copy of Partnership Agreement.
- Section C completed by the sponsoring title insurance company.
- Copy of a valid Assumed Name Certificate filed in the county(ies) in which the title agent will operate.
- Non-refundable license fee of \$50.00.
- Title Insurance Agent's Bond or in lieu thereof a cash deposit or irrevocable letter of credit issued by a financial institution in this state insured by an agency of the United States Government (or securities approved by the Department) in the sum of the greater of ten thousand dollars (\$10,000.00) or an amount equal to ten percent (10%) of the gross premium written by the agent in accordance with the latest statistical report to the Department but not to exceed one hundred thousand dollars (\$100,000.00). (The Principal name on the Bond must appear as: Names of all partners dba Trade Name.)

**C. CORPORATION** - the following must be submitted:

- Section A for each officer, director and manager.
- Section B completed by applicant title agent. The agent name on Section B must appear as the full, exact agent name. If an Assumed Name is being used the agent name on Section B must appear as: Corporate Agent Name dba Assumed Name. (IF A SINGLE CORPORATION USES MORE THAN ONE ASSUMED NAME, A SEPARATE APPLICATION MUST BE SUBMITTED FOR EACH ASSUMED NAME.)
- Section C completed by the sponsoring title insurance company.
- An ORIGINAL certified copy of the Articles of Incorporation from the Texas Secretary of State.
- If using an Assumed Name, copy of a valid Assumed Name Certificate filed with the Secretary of State and/or County Clerk(s) for each county in which the title agent will operate.
- A current Certificate of Account Status issued by the Franchise Tax Division of the Texas State Comptroller's Office.
- Non-refundable license fee of \$50.00.
- Title Insurance Agent's Bond or in lieu thereof a cash deposit or irrevocable letter of credit issued by a financial institution in this state insured by an agency of the United States Government (or securities approved by the Department) in the sum of the greater of ten thousand dollars (\$10,000.00) or an amount equal to ten percent (10%) of the gross premium written by the agent in accordance with the latest statistical report to the Department but not to exceed one hundred thousand dollars (\$100,000.00). The Principal name on the Bond must appear as the full, exact agent name, including assumed name (if any).
- Application for at least one individual to act as escrow officer for the Corporate Title Agent and a Texas Escrow Officers Schedule Bond or in lieu thereof a cash deposit or irrevocable letter of credit issued by a financial institution in this state insured by an agency of the United States Government (or securities approved by the Department).

**D. LIMITED LIABILITY COMPANY** - the following must be submitted:

- Same as requirements for Corporation except original certified copy of Articles of Organization instead of Articles of Incorporation must be submitted.

**IN ADDITION TO THE ABOVE, THE SPONSORING UNDERWRITER MUST SUBMIT THE FOLLOWING:**

- Executed Original Abstract Plant Form
- Executed Original Agent Contract
- Agent Contract Submission Form

Rev. 03/2004

**SECTION A -- Application for Texas Title Insurance Agent's License**

1. Name in full: Mr. Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Ms. (No initials accepted) (No initials accepted)

2. Position (check all that apply to this filing)  Shareholder  Director  Officer  Manager

3. Residence Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

4. Social Security Number \_\_\_\_\_ 5. Texas Resident  Yes  No  
(Disclosure of Social Security Number is required by the Texas Family Code §231.302)

6. Date of Birth \_\_\_\_\_ 7. Driver's License # \_\_\_\_\_ State \_\_\_\_\_  
(MM DD YY)

8. Marital Status  Single  Married  Divorced  Widowed

\*If you answer "Yes" to question 9a, 9b, 9c, and/or 9d, you must submit original **CERTIFIED** copies of the indictment or charging document, conviction, order deferring adjudication, judgment and conditions of probation from the appropriate jurisdiction, for each and every crime or offense. You may also include letters of recommendation on your behalf. Please provide full information with dates and details on a separate sheet of paper. Application processing will be suspended until the details are received and a review is completed. **If certified documents have been previously submitted to the department, please do not resend.**

9. Excluding traffic violations and first offense DWI:
- a. do you currently have any pending misdemeanor or felony charges (by indictment, information, or any other instrument) filed against you in Texas, any other state, or by the federal government? \* YES  NO
  - b. have you ever been convicted of any misdemeanor or felony offense in Texas, any other state, or by the federal government? \* YES  NO
  - c. have you ever had adjudication deferred on any misdemeanor or felony charge or offense in Texas, any other state, or by the federal government? \* YES  NO
  - d. have you ever served any period or probation for any misdemeanor or felony offense in Texas, any other state, or by the federal government? \* YES  NO

**NOTE: If you answer "yes" to any of questions 10 through 15, you must provide a personal statement with dates and complete details on a separate sheet of paper. Application processing will be suspended until the details are received and a review is completed.**

- 10. Have you or has any corporation, partnership, association, or firm in which you were a director, officer, shareholder, manager, member, or partner ever been the subject of an administrative or legal action filed by Texas or any other insurance department, or an action filed on behalf of Texas or any other state or by the federal government based on alleged violations of state or federal insurance or securities laws?  YES  NO
- 11. Are you now indebted to a special deputy receiver of the Texas Department of Insurance, any insurance company, general agent or agent?  YES  NO
- 12. Have you ever had an agency contract canceled for cause (e.g., misrepresentation, misappropriation, etc.)?  YES  NO
- 13. Have you ever had a professional license, an insurance license or company appointment refused, suspended or revoked in Texas or any other state?  YES  NO
- 14. Do you now have pending litigation against you alleging violation of the Texas Insurance Code?  YES  NO
- 15. Have you ever held ownership interest in any insurance agency or company?  YES  NO
- 16. Do you have another business name or alias?  YES  NO  
If YES, indicate business name or alias here: \_\_\_\_\_
- 17. Have you ever held a professional license, insurance license or company appointment under any other name?  YES  NO  
If YES, indicate other name(s) here: \_\_\_\_\_

18. List any judgments against you held by any insurance company or insured which are unpaid in whole or in part.

\_\_\_\_\_  
\_\_\_\_\_

19. List any judgments against you which involved violation of the Texas Insurance Code. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

20. List any other business to which you intend to devote a part of your time:

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

21. Give complete details of all employment, self employment, or unemployment during the last five (5) years.

Dates	Employer and Address	Title
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

22. Give the names and street addresses of three (3) business or professional references from the community where you have resided for the last five years.

Name	Address	Type of Business
_____	_____	_____
_____	_____	_____
_____	_____	_____

23. Have you personally answered and understood each question pertaining to you on this application?  YES  NO

Full Name \_\_\_\_\_  
Print/Type Full Legal Name

Signature \_\_\_\_\_

Affix Notary Seal Here

Subscribed and sworn to before me

Date \_\_\_\_\_, 20 \_\_\_\_\_

Notary Public \_\_\_\_\_

**NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES**

With few exceptions, you are entitled to be informed about the information that the Texas Department of Insurance (TDI) collects about you. Under sections 552.021 and 552.023 of the Texas Government Code, you have a right to review or receive copies of information about yourself, including private information. However, TDI may withhold information for reasons other than to protect your right to privacy. Under section 559.004 of the Texas Government Code, you are entitled to request that TDI correct information that TDI has about you that is incorrect. For more information about the procedure and costs for obtaining information from TDI or about the procedure for correcting information kept by TDI, please contact the Agency Counsel Section of TDI's Legal & Compliance Division at (512) 475-1757 or visit the Corrections Procedure section of TDI's web page at [www.tdi.state.tx.us](http://www.tdi.state.tx.us).



14. A Texas Title Insurance Agent's Bond must be filed with the Texas Department of Insurance prior to the issuance of a title insurance license.

- Bond currently on file with the Texas Department of Insurance
- Bond enclosed

**THE FOLLOWING QUESTIONS 15 THROUGH 24 SHOULD BE ANSWERED ON A SEPARATE SHEET OF PAPER AND ATTACHED TO SECTION B**

- 15. If a Partnership, Corporation or Limited Liability Company, provide a list of all shareholders, partners, managers, officers, and directors (as applicable) of the proposed agent. If a shareholder is an entity, list all shareholders, partners, managers, officers, and directors (as applicable) of the entity shareholder.
- 16. Provide the name(s) of the proposed agent's on site managerial personnel and describe in detail their prior experience in the business of Texas title insurance. This should be the person(s) on site overseeing the day to day operations. (Applicant should demonstrate reasonable experience or education in the field of title insurance in Texas such that success of the agent is rendered probable.)
- 17. Attach copy of or provide full details of any agreement, other than the required title agent contract, which you have with the underwriter(s) with whom you will do business.
- 18. Detail the projected source of financing for the business, including any projected loans for working capital and fixed assets.
- 19. Provide an audited, reviewed, or compiled financial statement of your agency prepared by an independent CPA and at least 60 days current.
- 20. Detail the projected source and amount of business which will be written by your agency during its first year of operation.
- 21. Attach a sample Schedule D Form (Rule P-21) for the proposed agent.
- 22. Attach a completed Title Agent Update Form.
- 23. Provide the name, address and telephone number of the accounting firm which will complete your required annual escrow audit report of trust funds handled through your agency.
- 24. Provide the name of the individual responsible for the preparation of the annual statistical report which must be filed with the Texas Department of Insurance.

**APPLICANT CERTIFICATION**

I certify that this applicant qualifies as a Title Insurance Agent as defined in Chapter 9 of the Texas Insurance Code and hereby execute this form and upon oath affirm that all statements in it and in all supporting forms, schedules, documents and exhibits are true, correct and are made for the purpose of securing the license indicated herein.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Sole Proprietor\* Partner  
or Authorized Officer\*) (\*circle one)

Affix Notary Seal Here

Subscribed and sworn to before me

Date \_\_\_\_\_, \_\_\_\_\_

Notary Public \_\_\_\_\_

**SECTION C -- Application for Texas Title Insurance Agent's License**

**APPOINTING INSURANCE COMPANY CERTIFICATION AND NOTICE OF APPOINTMENT**

Applicant \_\_\_\_\_  
(Give full, exact agent name)

This is to certify that the above applicant is appointed to act as a title agent for this company in the state of Texas, subject to applicant's qualifying for a license. This is notice of appointment of the applicant for a license to act as a Title Insurance Agent in the County (Counties) of:

\_\_\_\_\_  
\_\_\_\_\_

State of Texas. If and when this appointment is terminated or cancelled, the Texas Department of Insurance will be notified immediately of such termination.

Our company has investigated this applicant's character and reputation for honesty and trustworthiness, and we are satisfied that the applicant is trustworthy and will act in good faith to the public. This company knows of no fact or condition which would disqualify such applicant from receiving a license.

Appointing Title Insurance Company's Texas Department of Insurance Company Number \_\_\_\_\_

\_\_\_\_\_  
(Name of Appointing Title Insurance Company) (Typed or Printed Name of Appointing Official)

\_\_\_\_\_  
(Mailing Address) (Original Signature of Appointing Official)

\_\_\_\_\_  
(City) (State) (Zip) (Title)

\_\_\_\_\_  
(Address of Appointing Official)

Affix Notary Seal Here

Subscribed and sworn to before me

Date \_\_\_\_\_, \_\_\_\_\_

Notary Public \_\_\_\_\_

Federal Employee Identification Number of Appointing Title Insurance Company \_\_\_\_\_  
(The Texas Department of Insurance cannot require this number. However, if a refund is due your company for any reason, this number is required by the State Comptroller of Public Accounts before a refund check will be issued.)