



Texas Department of Insurance

512 322-4283 telephone • 512 305-7512 fax • www.tdi.state.tx.us

Insurance Agent/Agency Order Form

Agent/Agency Data available on CD only and includes: Original State ID Number, License ID Number, Name, Address, City, State, Zip, Phone, License Type, Qualification Type, License Issue Date, License Expiration Date

- \$15.00 _____ **Adjuster (Individual)**
Adjuster • Property and Casualty, Adjuster • All Lines, Adjuster • Worker's Compensation
- \$15.00 _____ **Adjuster Trainee (Individual)**
- \$15.00 _____ **County Mutual Agent/Agency**
- \$15.00 _____ **Emergency Managing General Agent**
- \$15.00 _____ **General Lines Agent/Agency**
Life, Accident, Health and HMO; Property and Casualty
- \$15.00 _____ **Insurance Service Representative (Individual)**
- \$15.00 _____ **Life Agent/Agency**
Life (Under \$15,000)
- \$15.00 _____ **Life and Health Insurance Counselor (Individual)**
- \$15.00 _____ **Limited Lines Agent/Agency**
- \$15.00 _____ **Managing General Agent/Agency**
- \$15.00 _____ **Pre-Need Agent/Agency**
Funeral Pre-Arrangement
- \$15.00 _____ **Reinsurance Broker (Individual or Firm)**
- \$15.00 _____ **Reinsurance Manager (Individual or Firm)**
- \$15.00 _____ **Risk Manager (Individual or Firm)**
- \$15.00 _____ **Specialty Agent/Agency**
Credit, Rental Car Company, Storage, Telecommunications, Travel
- \$15.00 _____ **Surplus Lines Agent/Agency**
- \$15.00 _____ **Temporary County Mutual Agent**
- \$15.00 _____ **Temporary General Lines–Emergency Adjuster (Individual)**
- \$15.00 _____ **Temporary General Lines–Emergency Property and Casualty Agent**
- \$15.00 _____ **Temporary General Lines–Life, Accident and Health Agent**
- \$15.00 _____ **Temporary General Lines–Property and Casualty Agent**
- \$15.00 _____ **Temporary Life Agent**
- \$15.00 _____ **Temporary Limited Lines Agent**
- \$15.00 _____ **Temporary Pre-Need Agent**

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.

Insurance Companies Order Form

Company Appointments *(Please specify exact company name)*

Includes: Old TDI Number, Individual ID Number, Name, Address, City, State, Zip, Phone, License Issue Date, License Number, License Expiration Date, License Type, Qualification Type, Appointment Effective Date, Appointment Type, NAIC Number, Appointing Company Name.

COMPANY NAME	NAIC#	COMPANY#

QUANTITY

_____ **CD of Company Appointment @ \$15.00** each company name

_____ **E-mail of Company Appointment @ \$15.00** each company name

Authorized Insurance Companies

Includes: Home Office Name, Address, Licensed Lines, Assets, Liabilities and Phone Numbers.

QUANTITY

_____ **CD of Authorized Insurance Companies @ \$15.00**

_____ **Paper List of Authorized Insurance Companies @ \$47.25**

List of Insurance Companies *(Please specify line of coverage from list below)*

Includes: Home Office Name & Address provided; quantity info not included.

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Accident | <input type="checkbox"/> Credit | <input type="checkbox"/> Health Maintenance Services | <input type="checkbox"/> Ocean Marine |
| <input type="checkbox"/> Aircraft Library | <input type="checkbox"/> Employers Liability | <input type="checkbox"/> Home Warranty | <input type="checkbox"/> Pre-Paid Legal Services |
| <input type="checkbox"/> Air Physical Damage | <input type="checkbox"/> Fidelity & Surety | <input type="checkbox"/> Inland Marine | <input type="checkbox"/> Rain |
| <input type="checkbox"/> Allied Coverage | <input type="checkbox"/> Fire | <input type="checkbox"/> Job Protection | <input type="checkbox"/> Reinsurance All Lines |
| <input type="checkbox"/> Attorneys Title | <input type="checkbox"/> Forgery | <input type="checkbox"/> Liability Other | <input type="checkbox"/> Title |
| <input type="checkbox"/> Auto Liability | <input type="checkbox"/> Glass | <input type="checkbox"/> Life | <input type="checkbox"/> Variable Annuities |
| <input type="checkbox"/> Auto Physical Damage | <input type="checkbox"/> Hail | <input type="checkbox"/> Livestock | <input type="checkbox"/> Variable Life |
| <input type="checkbox"/> Boiler & Machinery | <input type="checkbox"/> Health | <input type="checkbox"/> Mortgage Guaranty | <input type="checkbox"/> WC Employee Liability |
| <input type="checkbox"/> Burglary & Theft | | | |

QUANTITY

_____ **Paper List of Insurance Companies @ \$40.50** each line of coverage *(This item can not be e-mailed.)*

Please enter quantity desired and order total. The prices include taxes and shipping. Please print your name and address in the spaces below. Make your check payable to Texas Department of Insurance. Return this order form with your remittance to:

Texas Department of Insurance, Distribution MC 9999, P.O. Box 149104, Austin, Texas 78714-9104

NAME	ATTENTION		
PHONE	FAX		
STREET	CITY	STATE	ZIP

E-MAIL ADDRESS

ORDER TOTAL \$