



Texas Department of Insurance

TPA/Premium Finance Section Mail Code 107-TPA-PF

P. O. Box 149104, Austin, Texas 78714-9104

512-322-3412 or 512-322-3555 telephones • 512-322-4380 fax • www.tdi.state.tx.us

APPLICATION FOR AN INSURANCE PREMIUM FINANCE LICENSE BY A BANK OR SAVINGS AND LOAN ASSOCIATION (FORM PF1B)

Application for: Bank Savings and Loan

Name: _____

Address:

a. Street _____

b. City _____ State _____ Zip _____

c. Mailing Address _____

d. City _____ State _____ Zip _____

Telephone Number: _____

Bank/Savings and Loan Charter Number _____ (As issued by the State Banking Department or by the Comptroller of the Currency.)

Is the Bank/Savings and Loan affiliated with any other Bank, Savings and Loan Association, Holding Company, or other financial institution? _____

If yes, give the name and address: _____

The following are submitted as required (indicate by circling letter):

- A. Copy of Charter issued by the State Banking Department or by the Comptroller of Currency.
- B. Franchise Tax Certificate of Good Standing <http://ecpa.cpa.state.tx.us/coa/Index.html> or letter of exemption issued by the Texas Comptroller of Public Accounts.
- C. Appointment of Statutory Agent and Consent to Service (LHL106 Form PF6).
- D. License Fee as indicated below:
 - (1) Licenses issued January 1 through June 30: \$200.00
 - (2) Licenses issued July 1 through December 31: \$100.00

Signature: _____

Title: _____

Date: _____