



Texas Department of Insurance

Licensing/Continuing Education
PO Box 149104 Austin, Texas 78714-9104

APPLICATION FOR LICENSEE EXEMPTION OR EXTENSION

PRINT OR TYPE- see instructions next page.

1. Licensee's Name: _____

2. Licensee's Mail Address: _____

3. Licensee's SSN: _____ 4. Licensee's email: _____

5. Check one box:

a. This application is for an exemption from continuing education
My signature below certifies that I have been licensed by the Texas Department of Insurance for at least 20 continuous years, with no gaps in licensure greater than 90 days.

Original date of Issuance _____
Documentation may be required if our records do not reflect this date or continuous licensure.

b. This application is for an extension of time to complete continuing education due to:
____ Illness or medical disability
____ Circumstances not related to business beyond the licensee's control
____ Active military duty in a combat theater.

Documentation required as applies:

- (A) Statement of the exact nature of the illness, medical disability or other extenuating circumstances beyond the control of the licensee that have prevented or will prevent the licensee from completing the required hours within the two year reporting period.
- (B) Evidence in the form of medical reports from attending physician or evidence through insurance claims regarding the illness or medical disability of the licensee and other documentation as determined regarding circumstances beyond the control of the licensee.
- (C) Assessment of the condition of the licensee whether it is temporary, permanent or unknown.
- (D) Statement as to whether the licensee will or will not be able to perform activities including any acts of an agent or adjuster.
- (E) Estimated date when the licensee will be able to perform any activities including any acts of an agent or adjuster in accordance with the medical reports or other documents pertaining to circumstances beyond the control of the licensee
- (F) Copy of order to active duty, expected duration of assignment, and any other information licensee thinks will assist the department.

6. Signature of licensee _____ Date _____

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 552.022 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 information about the procedure and costs for obtaining information from TDI, please contact the Agency Counsel Section of TDI's Legal and Compliance Division at (512) 475-1757 or visit the Corrections Procedure section of TDI's web page at www.tdi.state.tx.us.

INSTRUCTIONS

Print or type information requested in items 1, 2, 3, 4. Make sure licensee's name is given exactly as it is on the license.

This form may be used to apply for a "grandfather" exemption or for an extension of time to do continuing education. Either option is open to both agents and adjusters. In item 5, mark the box that applies.

Exemption: if licensee's next renewal is after 12/31/2002, the 20 years licensure must be continuous, with no gap longer than 90 days, and the license held must have been issued by the Texas Department of Insurance. Licensure in other states may not be counted as part of the 20 years. If the department's records show gaps in licensure greater than 90 days or that in some other way licensure does not total 20 years, documentation will be requested from the licensee.

Extension of time to do continuing education: The licensee may request an extension of time or a waiver, if prevented from doing the required 30 hours within the two year renewal cycle by illness, medical disability, non-business extenuating circumstances beyond the licensee's control, or because of active military service in a combat theater. Documentation required is listed in items 5.b.(A)-(F).

The department retains the right to audit any exemption or extension granted at any time.