



# Application for Independent Review Organization

**Check appropriate box for application requested.**

Initial Application – Fee \$250.00  
 Renewal Application – Fee \$200.00  
IRO License Number \_\_\_\_\_

**INSTRUCTIONS:**

1. All Independent Review Organization (IRO) licenses must be renewed annually. Initial applications and renewals can be submitted on line at [www.sircon.com/Indiana](http://www.sircon.com/Indiana) or by paper submission.
2. IRO Annual Report is due by March 1<sup>st</sup> each year.
3. **Initial Application:** Submit application, IRO checklist with documentation, and initial fee.
4. **Renewal Application:** Submit application and renewal fee. Checklist with documentation is only required for changes since the last renewal.
5. Any **material** change to the information on the application or renewal form previously submitted should be reported not later than the thirtieth (30<sup>th</sup>) day after the date on which the change takes effect. This includes name, principal business address, mailing address and external review contact information.
6. Any change resulting in a **new tax EIN#** is considered an initial application.

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**Indiana Department of Insurance**

For Dept. use only:

Date Fee \_\_\_\_\_

Processed \_\_\_\_\_

Date Registration \_\_\_\_\_

Processed \_\_\_\_\_

**Corporate Demographics**

Name of Independent Review Organization

D/B/A Name

FIN/EIN Number

Address (If P.O. Box address, also list street address)

City

State

Zip Code

Telephone Number

Toll Free Number

Fax Number

Name of Contact Person

Telephone number

E-mail Address

## External Appeals Contact

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Telephone Number	Fax Number	After Hours Fax
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### Certification

This company, through its duly authorized offer, hereby applies for the registration authorizing it to operate as an independent review organization in the State of Indiana, and does hereby swear that all responses, information, exhibits, and documentary evidence submitted in support of this application are true and correct.

**Renewal Application Certification:** (check one)

- I certify that there have been no changes to any application information and documentation submitted during the last year; or
- I certify that there have been changes to the previously submitted application information and documentation and have attached the revised documentation.
- New Application Certification**

Certified by:

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Signature of Applicant	Title	Date
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Printed Name

Initial application registration or renewal registration can be completed electronically at [www.sircon.com/indiana](http://www.sircon.com/indiana) or by mailing materials to:

Att: IRO Coordinator  
Indiana Department of Insurance  
311 W. Washington Street  
Indianapolis, IN 46204-2787