

Viatical Provider Renewal Checklist

Renewal Year June 20_____ to June 20_____

Provider Name: _____

Address: _____

City/State/Zip: _____

Contact Name: _____

Contact Email: _____ Telephone: _____

Required items

Submitted
Yes/No

	1. Completed Application for Licensure as Viatical Settlement Provider
	2. Renewal fee \$500 (Fee will be invoiced in May)
	3. Copy of the most current audited financial statement showing a net worth in the amount of not less than \$150,000. (If consolidated, a breakdown of each entity is required)

Required items - if there have been changes since the last renewal

Submitted
Yes/No/NC

	1. Copies of the provider's organization documents, including but not limited to: a) Articles of Incorporation or association b) Partnership agreement c) By-laws
	2. Biographical affidavits for all officers, directors, stockholders, investors, partners, trustees or members holding ten percent (10%) or more voting securities. All new biographical affidavits must be originally signed, dated and notarized. Third party verification reports are not required.
	3. List of all business licenses.
	4. Listing of parent, subsidiary and affiliated entities.
	5. A copy of any viatical settlement contract to be used, along with the Contract Compliance Checklist. (checklist found at www.in.gov/idoi/2756.htm)
	6. A copy of any disclosure form to be used, along with the Disclosure Form Compliance Checklist (checklist found at www.in.gov/idoi/2756.htm)
	7. An original copy and a red-lined copy of any forms to be used by the Provider that have not been approved by the DOI along with a Document Change Checklist (checklist found at www.in.gov/idoi/2756.htm)
	8. Plan of operation including escrow accounts and bank accounts, advertising, marketing techniques.

Please forward the Renewal to:

Company Admission Coordinator
Indiana Department of Insurance
311 W. Washington St, Suite 300
Indianapolis IN 46204