



OKLAHOMA INSURANCE DEPARTMENT  
 FINANCIAL DIVISION  
 3625 NW 56<sup>th</sup> ST, SUITE 100 • OKLAHOMA CITY, OKLAHOMA 73112-4511  
 (405) 521-6651 • FAX: (405) 522-4160 • [jeanette.pearce@oid.ok.gov](mailto:jeanette.pearce@oid.ok.gov)

## APPLICATION FOR VIATICAL SETTLEMENT PROVIDER

The Viatical Settlements Act of 2008, Title 36 O.S. § 4055.1 et seq. and O.A.C. 365:25-11 (1-11)

INITIAL APPLICATION       RENEWAL APPLICATION, OK LICENSE # \_\_\_\_\_

**Application Fee \$500 + Initial Service of Process \$10 or if Amended Service of Process \$10**

**Checks must be made payable to the OKLAHOMA INSURANCE DEPARTMENT**

Applicant's Legal Name as registered with the OK Secretary of State pursuant to Title 18 O.S. § 1130			FEIN #
Business Type <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Other (Attach Legal Documents)			
Date Organization was Incorporate or Formed		State Organization was Incorporated or Formed	
Trade Name(s), Doing Business As (DBA), or Other Name(s) used by the Organization Pursuant to OK Secretary of State Title 18 O.S. 1140			
Business Address (Physical Location)		City	State      Zip
Business Telephone #	Fax #	Business E-mail Address	
Business Mailing		City	State      Zip
Location of Organization's Books & Records for OK Business		City	State      Zip
Primary Contact Name & Title		E-mail Address	Telephone #      Fax #
Primary Contact Mailing Address		City	State      Zip
Service of Process Contact Address		City	State      Zip
Telephone #	Fax #	E-mail Address	

### APPLICATION CERTIFICATION

Pursuant to Title 36 O.S. § 4055.3(D) provide the identity of all stockholders with 10% or greater ownership, including partners, officers, directors and members affiliated with the entity. Include the UCAA Form 11 Biographical Affidavit for each individual, as well as an independent third party background report from a NAIC approved vendor with the initial application and any time there is a change.	<u>Initial App</u>	<u>Renewal App</u>
1. Has the applicant or any of its employees, partners, members, directors, or officers ever had a Life Settlement Broker, Viatical Settlement Broker, or insurance license refused, revoked, suspended, or terminated by any insurance department? If yes, provide details and any legal documentation on a separate sheet.		
2. Have the authorities of any state ever called the applicant or any of its employees, partners, members, directors, or officers before them for any alleged violation(s) of insurance laws on any allegations of fraudulent or dishonest practices? If yes, provide details and any legal documentation on a separate sheet.		

3. Has the applicant or any of its employees, partners, members, directors, or officers ever entered a consent order with any state insurance authority? If yes, provide details and any legal documentation on a separate sheet.		
4. Has the applicant or any of its employees, partners, members, directors, or officers ever been found guilty of fraudulent or dishonest practices, or found guilty of a felony or any misdemeanor of which criminal fraud is an element, or is otherwise shown to be untrustworthy or incompetent? If yes, provide details and any legal documentation on a separate sheet.		
Pursuant to Title 36 O.S. § 4055.3(F)(1) provide a detailed plan of operation with the <b>initial</b> application for licensure, or an <b>amended</b> plan of operation if there has been a change since the last renewal period.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to Title 36 O.S. § 4055.3(F)(4)(a) provide evidence of a surety bond executed and issued by an insurer authorized to issue surety bonds in this state, a policy of errors and omissions insurance issued by an insurer authorized to do business in this state, or a deposit of cash in the form of a Certificate of Deposit or Securities or any combination thereof in an amount of \$50,000.	<a href="#">Initial App</a>	<a href="#">Renewal App</a> Provide Continuance Verification
Pursuant to Title 36 O.S. § 4055.3(F)(4)(c) and § 4055.7 provide an Audited Financial Statement in a format consistent with GAAP accounting practices and procedures, to include notes to financial statement and independent auditors report.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to Title 36 O.S. § 4055.3(F)(5) provide a current Certificate of Good Standing/Compliance from the state of domicile.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to Title 36 O.S. § 4055.3(F)(6) provide a current Anti-Fraud Plan that meets the requirements of Title 36 O.S. § 4055.13(G) of Enrolled Senate Bill No. 1980 of the 2 <sup>nd</sup> Session of the 51 <sup>st</sup> Oklahoma Legislature.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to Title 36 O.S. § 4055.3(G) provide a UCAA Form 12 Service of Process form designating any action against the applicant may be commenced against the applicant by service of process on the Commissioner. Fee is \$10 pursuant to Title 36 O.S. § 321(A)(3) at initial application or amendment.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to Title 36 O.S. § 4055.5 all Viatical settlement contract forms or disclosure statement forms must be filed and approved electronically through SERFF by the Oklahoma Rate & Form Division (405-521-3681) once the initial license has been approved, and thereafter for any changes.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to Title 36 O.S. § 4055.6 and O.A.C. 365:25-11-5 the Viatical settlement provider shall file an annual statement with the Rate & Form Division (405-521-3681) of the Oklahoma Insurance Department containing information for any policy settled within 5 years of the date of issuance of the policy, including the total number, aggregate face amount and life settlement proceeds of policies settled during the immediately preceding calendar year, together with a breakdown of the information by policy-issue year only on those transactions where the viator is a resident of this state, using forms VSPB 001, VSP 002 and VSP 003, submitted by e-mail to oidreports@oid.ok.gov annually by March 1.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to O.A.C 365:25-11-7 provide a copy of any advertisement intended for use in this state whether through written, radio, or television medium with this application for review and approval before the advertisement is disseminated within the state.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to Title 18 O.S. §§ 1130, 1132, 1140 provide a current Oklahoma Certificate of Incorporation or Organization, and if applicable Trade Name Certificate from the Oklahoma Secretary of State to verify legal registration to do business in Oklahoma is authorized.	<a href="#">Initial App</a>	<a href="#">Renewal App</a>
Pursuant to Title 18 O.S. § 1131 provide the Oklahoma Insurance Department with an amended Certification of Incorporation or Organization, and if applicable an amended Trade Name Certificate from the Oklahoma Secretary of State, and provide Certificate of Good Standing/Compliance from the state of domicile at any time the Viatical settlement provider has a name change. If applicable, list prior company name:	<a href="#">Initial App</a>	<a href="#">Renewal App</a>

## APPLICATION DECLARATION

I, the undersigned, declare under penalties of revocation or refusal of license that the statements made in this application are true, correct and complete to the best of my knowledge and belief and that I have read and understand the Viatical Settlement Act of 2008 and all related Oklahoma regulations pursuant to Title 36 O.S. 4055.1 et seq. and rules pursuant to O.A.C. 365:25-11 (Oklahoma regulations and rules can be found on the OSCN at ([http://www.ok.gov/oid/Public\\_Information/Legal/Statutes\\_and\\_Rules.html](http://www.ok.gov/oid/Public_Information/Legal/Statutes_and_Rules.html))).

**The DECLARATION must be signed by each 10% or greater owner, including partners, officers, directors and members affiliated with the entity. (Make additional copies of this page as needed.)**

Signature	Date
Printed Name	Title
Signature	Date
Printed Name	Title
Signature	Date
Printed Name	Title
Signature	Date
Printed Name	Title
Signature	Date
Printed Name	Title
Signature	Date
Printed Name	Title
Signature	Date
Printed Name	Title
Signature	Date
Printed Name	Title
Signature	Date
Printed Name	Title