



State of New Jersey
 Department of Banking and Insurance
 Licensing Services Bureau
 20 West State Street
 P.O. Box 327
 Trenton, NJ 08625-0327

Organization Public Adjuster License Renewal Instructions

This is the form to renew your organization's public adjuster license for the next licensing period. If you do not renew this license, your organization will no longer be authorized to conduct the business under which it was licensed.

To renew your license, you must:

1. Answer all of the questions listed in the Public Adjuster Organization License Renewal Form below.
2. Sign, date and include the Federal Identification Number of the organization on the renewal form in the spaces provided.
3. Make a CHECK or MONEY ORDER for the renewal fee shown below, payable to:

TREASURER, STATE OF NEW JERSEY

Print your organization's license reference number (shown in the box below) on the check or money order.

Organization Public Adjuster License Renewal Fee: \$50

Detach the renewal form below and return to the above address before expiration date

| Public Adjuster Organization License Renewal Form | | YES | NO |
|---|---|--|--------------------------|
| You must answer the following questions by checking the appropriate box: | | | |
| 1. | During the last license period, have you (or any officer, partner, director or member of the firm) been arrested, indicted or convicted of a crime, misdemeanor or disorderly person offense in this State, any other state, or by the federal government or such proceedings pending against you? <i>If yes, enclose a certified copy of the indictment or judgment of conviction, which may be obtained from the clerk of the court where the conviction was entered, or the case is pending.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | During the last license period, have you (or any officer, partner, director or member of the firm) had any business or professional license suspended or revoked or are such proceedings pending against you? <i>If yes, attach a copy of order seeking or granting suspension or revocation issued by the professional or governmental authority.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. | Are you (or any officer, partner, director or member of the firm) indebted (other than accounts current) to any insurance company, producer or insured or has any judgment been rendered against you, which has not been satisfied or vacated, for money received from or owed to any insurance company, producer or insured? <i>If yes, attach copy of judgment.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. | During the last license period, have you (or any officer, partner, director or member of the firm) received any civil penalty or fine, or been required to provide restitution to any person, pursuant to any unfair trade practice statute, consumer fraud or consumer protection statute; insurance fraud statute or similar statute in this State, any other state or by the federal government; or are any such complaints or lawsuits presently pending against you. <i>If yes, attach complete written explanation and a copy of the final disposition document, if any.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. | The New Jersey Public Adjusters' Licensing Act requires each licensee to maintain a \$10,000 dollar bond. Are you in compliance with this requirement? | <input type="checkbox"/> | <input type="checkbox"/> |
| Please enter the bond expiration date ____/____/____ | | | |
| License Reference Number: | License Type: Organization | Please enter Federal Identification Number of the organization, sign and date this form in the areas provided below: _____-_____-_____ Federal Identification Number | |
| | Renewal Fee: | _____ Signature Date | |