

Alaska Premium Finance Company Application - Checklist

GENERAL INSTRUCTIONS- To ensure there are no delays in the review of your application:

Complete applications on enclosed forms. Processing of the application begins upon receipt of required documents and fees, an incomplete application delays processing.

All required forms, attached for your convenience, listed below:

- ❖ *Alaska Company Uniform Application*
- ❖ *Alaska Premium Finance Affidavit*
- ❖ *MU2 Form*
- ❖ *State Regulatory Questionnaire*
- ❖ *Alaska Premium Finance Act Bond*

Please complete as a fill-in document, **we no longer accept hand-written documents**. Legible photocopies with original signatures are acceptable. All forms are to be fully completed. Insert "N/A" or "NOT Applicable" where appropriate. When space is insufficient, use a separate page. Information on inserted pages must reference appropriate questions by letter and number. The applicant provides, under oath, the application, supplemental pages, and other related information; filing at the address noted below.

ALASKA AUTHORITY

Alaska Statute 06.01.025 Records of the Department

- (a) Information in the records of the department obtained through the administration of this title is confidential, is not subject to subpoena, and may be revealed only with the consent of the department.

You are responsible for reviewing the **Premium Financing Act ([AS 06.40](#))** and **accompanying regulation ([3 AAC 07](#))** to ensure familiarity and compliance.

FEES

LICENSE TYPE	APPLICATION Fee	LICENSING FEE
Premium Finance Company (AS 06.40.010)	\$500.00 as partial payment of investigation expenses (non-refundable) *	\$200.00 (non-refundable) \$200.00 for each additional location (non-refundable)

**Investigation expenses incurred by the department in processing the application for licensure shall be charged to and paid by the applicant under AS 06.01.010. Those costs will be billed separately upon the completion of the investigation.*

Please note you will receive an invoice for investigative fees related to the issuance of a new license.

For U.S. Postal Service:

State of Alaska, Department of Commerce, Community & Economic Development
Division of Banking & Securities
PO Box 110807, Juneau, AK 99811-0807

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Complete ALL sections of the application and supplemental information. Be sure the application is signed and dated (unsigned applications are returned). Make a copy for your files.

An application to establish a premium finance company shall be submitted to the Division of Banking and Securities. It is preferred the application be submitted electronically to: loanentity.licensing@alaska.gov

- Application Procedure to License a Premium Finance Company.
 - Application Form - Starts on Page 5 of this pdf.
 - Alaska Affidavit Form- Starts on Page 15 of this pdf. Include supporting documentation for question #6b, if applicable.
 - Business License/Entity Registration: Enter your State of Alaska Business License and/or Entity Registration Number on the Business License/Entity Registration line, in accordance with [AS 43.70.020](#). DBSC will use this number to verify that you have completed two prerequisite items:
 - State of Alaska Business License
 - Domestic Business. If the applicant organized or formed inside Alaska, submit a copy of the current Alaska business license.
 - Sole Proprietorship. If the applicant is a sole proprietor, whether foreign or domestic, submit a copy of the current Alaska business license. You must register trade names ("DBA") on your business license as well.
 - The Alaska Division of Corporations, Business, and Professional Licensing issues [Business Licenses](#). (907) 465-2550
 - Registration with the State of Alaska
 - Domestic Business. If your company is not a sole proprietorship, you must register the company with the Alaska [Division of Corporations, Business, and Professional Licensing](#) (907) 465-2550
 - Foreign Corporation. If your company formed or incorporated outside the state of Alaska, you must register the company as a [Foreign Corporation](#) with the Alaska Division of Corporations, Business, and Professional Licensing, (907) 465-2550
- Company Business Documents
 - Business Plan: Submit a business plan detailing collection and transmission of the monies, records collection and retention, and use of authorized delegates / additional locations if applicable. Include the specific products and services you intend to offer under this license.
 - Formation Document: Submit a certified copy of one of the following:
 - The Corporate Charter or Articles of Incorporation (if a corporation)
 - The Articles of Organization and Operating Agreement (if a LLC)
 - The Partnership Agreement (if a partnership of any form)
 - Organizational Chart: Submit an organizational chart if applicant is owned by another entity or entities or person, or has subsidiaries or affiliated entities.

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- Management Chart: Submit an organizational chart showing the applicant's divisions, officers, and managers.
- Certificate of Good Standing: Submit a certificate issued by the state in which the corporation, limited liability company (LLC) or partnership organized or formed, demonstrating that the corporation or LLC exists or is authorized to do business in the state. The certificate must be no more than 60 days prior to the filing of an application.
- MU2 Form: Provide for each individual listed in 3(A), and each individual listed in 3(B) of the *Alaska Company Uniform Application*, if applicable. Starts on Page 11 of this pdf.
 - Residential History- Give a complete address history for the past 10 years, starting with current address.
 - Employment History- Provide a complete employment history for the past 10 years. Account for all time including full & part-time employments, self-employment, military service, and homemaking. Also, include periods such as unemployed, full-time student, extended travel, etc. Indicate by "YES" or "NO" whether this employment was *financial service-related* business.
- Bankruptcy/Receivership Information
- Licensing History- List of all premium finance company licenses currently held, applied for, denied, or revoked
 - Copies of all regulatory actions, state or federal
 - Submit a list of states currently licensed in. The applicant must send a State Regulatory Questionnaire to each state currently licensed in. Starts on Page 18 of this pdf.
- Litigation
 - Brief synopsis of all pending litigation
 - List of all closed litigation for 10 years prior to date application submitted
- Premium Finance Company Locations
 - List all states where company is currently engaged in the Premium Financing business.
 - If applicant is an affiliate or subsidiary, indicate the name, location, nature of business, manner or purpose of affiliation, and period of existence as such.
 - If any Alaska accounts are originated or serviced at an office other than what is on the application, state the nature of business conducted, location, phone number and fax number for the office.
 - Provide days of operation and business hours.
- Surety Bond- Submit an original surety bond in the amount of \$5,000.00 furnished by a surety company authorized to conduct business in Alaska. The name of the principal insured on the bond must match exactly the Full Legal Name of applicant and applicant DBA ([AS 06.40.030](#)). The bond should cover from the date of the application to January 1 of the following year. To complete, go to Page 16 of this pdf
- Financial Information - Financial statements must be prepared in accordance with Generally Accepted Accounting Principles and must include a Balance Sheet (statement of assets and liabilities), Income Statement and Profit and Loss Statement.

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- Submit a current financial statement as of the most recent quarter end for the applicant business (or personal financial statements for sole proprietorship).
- Submit a copy of your most recent audited financial statement and, if available, audited financial statements for the prior two years.
- If a newly formed business, also provide documentation supporting the method and source of capitalization (where the funding for your business comes from).
- If applicant is a wholly owned subsidiary of another corporation, may submit either the parent's consolidated audited financial statement of the current year and prior two years, or the parent's Form 10K reports filed with the United States Securities & Exchange Commission for the prior three years in lieu of the financial statements.
- Records and Reports
 - Submit a policy for maintaining books and records per [AS 06.40.100](#).
 - Submit a copy of the proposed premium finance agreements ([AS 06.40.110](#)) and all forms that would be used in administering the Alaska agreements, i.e., such as late payment notices, cancellation notices, account cards, receipts, etc.
 - Indicate if applicant provides financing for personal policies, commercial policies, or both.
 - Indicate whether monthly payments are made at the beginning or end of the period.
 - Explain how interest is being calculated (e.g. on a 360 or 365-day basis).
 - Discuss the length of notice period, how notices of intent to cancel and the notice of cancellation is sent to the borrower and insurance agent per [AS 06.40.140](#)(b) & (c).
 - Specify charges and fees associated with a premium finance agreement transaction per [AS 06.40.120](#)
 - Furnish a copy of the proposed schedule of rates to be used in calculating interest rate.
 - State if the company has a deficiency balance charge.
 - Provide a discussion of how unearned premiums are returned ([AS 06.40.150](#)).
 - Provide the company's policy on offering a borrower/insured an option to separate the financing of the premiums for one insurance policy from a premium finance agreement ([AS 06.40.130](#)(b)).
- Advertising
 - Please submit samples of advertising that will be used (as described in the business plan) per [AS 06.40.090](#).
 - If institution is located outside the state of Alaska, please explain how the business plans to engage with Alaska consumers and if employees will only work from the assigned home office location.
- Disclosure Questions: Provide an explanation for any "Yes" response (4(E) of the *Alaska Company Uniform Application*). Submit a copy of the letter of explanation and any applicable orders or supporting documents to the Division (*including certified court records, judgments, and charging documents as well as release documents for judgments, liens and bankruptcies and copies of regulatory orders and agreements*).

Alaska Company Uniform Application Form

1. Initial Information				
A. Entity Name (Sole Proprietors provide Last, First, and Full Middle Name)				
B. Trade Name for conducting business in Alaska:				
C. IRS Employer Identification Number (Social Security Number for sole proprietorship)				
D. Indicate legal status of licensee:				
E. If other than a sole proprietorship, indicate date and place the entity obtained its legal status (i.e., state or country where incorporated, where partnership agreement was filed, or where licensee entity was formed):				
Formation State		Formation Country		
F. Fiscal Year End (MM/DD)				
G. If publicly traded, insert stock symbol:				
H. Physical Address (Do not use P.O. Box)				
Number & Street	City	State	Country	Postal Code
I. Mailing Address Same as above				
P.O. Box or Number & Street	City	State	Country	Postal Code
J. Website Provide the full web address(es) for the company and any separate websites for other trade names used.				
1. Web Address:				
Is your company transacting business through this website?				
2. Web Address:				
Is your company transacting business through this website?				
3. Mobile Device Application:				
Is your company transacting business through this application?				
K. Business Communications				
Business Phone	Ext.	Fax Number	Ext.	Toll Free
Primary Email				
L. Other than the office in H., does the entity conduct business with consumers through branch offices or other business locations?				
All other locations and or branch offices the entity may use to conduct business with Alaskans must be reported as a "Delegate or Branch Location," even if said location is not located in Alaska.				
M. FinCEN Registration		Date of Filing		
N. Other Trade Names				
List any other trade name(s) (i.e. business name, fictitious name, or "doing business as" name) for this company below.				
Other Trade Names or "dba" used		State(s) where 'dba' Name is used		Identify applicable industry:
Other Trade Names or "dba" used		State(s) where 'dba' Name is used		Identify applicable industry:

Alaska Company Uniform Application Form

2. Personnel Contact Information

A. Resident/Registered Agent (If resident/registered agent is a company, put the words 'registered agent' in the Title field.)

First Name	Last Name	Company	Title
Number & Street (No P.O. Boxes)	City	State	Country
Postal Code			
Business Phone	Ext.	Fax Number	Ext.
Email Address			

List below the individual as the primary contact employee for this company. Minimum of one primary company contact and one primary consumer complaint (regulator) contact must be identified and the individual must be authorized to receive all compliance and licensing information, communications and mailings, and be responsible for disseminating it to others within your company as necessary. Use additional sheets if necessary.

B. Primary Application Contact

First Name	Last Name	Title
Number & Street (No P.O. Boxes)	City	State
Postal Code		
Business Phone	Ext.	Fax Number
Ext. Email Address		

C. Primary Compliance Contact

First Name	Last Name	Title
Number & Street (No P.O. Boxes)	City	State
Postal Code		
Business Phone	Ext.	Fax Number
Ext. Email Address		

D. Secondary Application Contact

First Name	Last Name	Title
Number & Street (No P.O. Boxes)	City	State
Postal Code		
Business Phone	Ext.	Fax Number
Ext. Email Address		

Indicate area in charge:

Provide the information requested below for the records custodian maintaining records for the company. Provide the name of the individual who should be contacted with inquiries or to gain access to the storage location. If multiple custodians maintain records for the company, use the Comments field to indicate the types of records this custodian maintains. Use additional sheets if necessary.

E. Books & Records Contact

First Name	Last Name	Title
Number & Street (No P.O. Boxes)	City	State
Postal Code		
Business Phone	Ext.	Fax Number
Ext. Email Address		

Comments:

Alaska Company Uniform Application Form

3. Executive Officers, Indirect Owners, & Foreign Agents

Provide the information requested below for the individual or company being identified as a (i) direct owner of 25% or more; (ii) executive officer; and/or (iii) control person of your company (excluding indirect owners that must be identified in the Indirect Owners section of this filing). An MU2 Form (attached left) must be completed for all natural person(s) identified in this section.

A. Executive Officers

Full Legal Name (Individuals: Last Name, First Name, MI)	Ownership Type	Equity Owner	% of Ownership	Stock Symbol (Company only)	SSN or EIN	Individual or Company

B. Indirect Owners

Full Legal Name (Individuals: Last Name, First Name, MI)	Direct Owner Of	Equity Owner	% of Ownership	Stock Symbol (Company only)	SSN or EIN	Individual or Company

C. Foreign Agents

Does the entity conduct money transmission or currency exchange using Foreign Agents and/or a Foreign Clearinghouse?®

YES NO (If yes, you must complete the information below) or you may submit the information in Excel format

Name (Include Legal and DBA Name)	Location (Physical Address)	Location (City)	Location (Country)	Postal Code

4. Additional Information

A. Affiliates/Subsidiaries

Affiliate/Subsidiary Name:

Number & Street (No P.O. Boxes)

City

State

Country

Postal Code

Control Relationship:

Affiliate (Under Common Control)

Subsidiary (Entity Controls)

Description:

I am providing an organizational chart or a document briefly describing control relationship(s) with affiliates/subsidiaries and control entities (including percentage of interest) Yes No

B. Authorized Delegate Locations / Branch Locations

Does the entity conduct money transmission or currency exchange using independent authorized agents or at company branch locations?

YES - You must submit the Applicant Delegate Workbook template attached to the Application Checklist. All Agents must obtain and maintain a valid Alaska business license. Expired Alaska business licenses will delay final review of your application.

NO

Alaska Company Uniform Application Form

4. Additional Information (Continued)

C. Bank Account Information

Account Type: Operating Bank Name:

P.O. Box or Number & Street City State Country Postal Code

Account Number: Notes:

D. Financial Institutions

If your company is controlled by a credit union, bank holding company, state member bank of the Federal Reserve System, state non- member bank, national bank, foreign bank, savings association/savings bank, or holding company, all such financial institutions must be identified in this section. Use additional sheets if necessary.

Type of Institution:

Financial Institution Name:

P.O. Box or Number & Street City State Country Postal Code

Relationship Description:

E. Business Activities

Select **all** business activities conducted by your company from the list below, including business activities for which a license request is being submitted or for which your company is not specifically seeking licensing authority.

Money Services	Consumer Finance	Debt
Electronic Money Transmission	Payday Lending – Storefront	First Party Debt Collection
Issuing Traveler's Checks	Payday Lending – Online	Third Party Debt Collection
Selling Traveler's Checks	Consumer Loan Brokering	Debt Negotiation
Issuing Money Orders	Consumer Loan Lending	Debt Settlement/Debt Adjuster
Selling Money Orders	Consumer Loan Servicing	Passive Debt Buying
Bill Paying	Sales Finance Company – Motor Vehicles	(Does Not Undertake Direct Collections On
Issuing and/or Selling Drafts	Sales Finance Company – General	Accounts)
Transporting Currency	Title Lending	Debt Management/Credit Counseling
Issuing Prepaid Access/Stored Value	Refund Anticipation Lending	Credit Repair
Open Closed Internet	Premium Finance Company	Judgment Recovery
Check Cashing	Retail Installment Selling	Repossession Agency Activities
Foreign Currency Dealing or Exchanging	Escrowing Agents	Non-Mortgage Loan Modifications
Door to Door Transactions	1031 Exchange Companies	Bi-Weekly Payment Processing Services
Internet Internet Only	Private Student Loan Lending	Other - Debt
Seasonal Business	Non-Private Student Loan Lending	
Dates of operation:_____	Rent-To-Own	
Other:_____	Accounting/Billing Servicing	
	Industrial Loan Lending Companies	
	Pawn Brokering	

F. Other Business

Will entity engage in any non-financial services-related business?

If "yes" briefly describe.

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5. Disclosure Questions

For purposes of responding to the questions below, the term "control affiliate" means: a partnership, corporation, trust, LLC, or other organization that directly or indirectly controls, or is controlled by, the licensee. If the answer to any of the following is "YES", you must provide complete details on a separate sheet.

Financial Disclosure

A. In the past ten years has the entity or a control affiliate been the subject of a bankruptcy petition?

B. Has a bonding company ever denied, paid out on, or revoked a bond for the entity?

C. Does the entity have any unsatisfied judgments or liens against it?

Criminal Disclosure

D. Has the entity or a control affiliate ever:

1. Been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?

2. Been charged with any felony?

3. In the past 10 years, been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a misdemeanor involving: (i) financial services or a financial services-related business, (ii) fraud, (iii) false statements or omissions, (iv) theft or wrongful taking of property, (v) bribery, (vi) perjury, (vii) forgery, (viii) counterfeiting, or (ix) extortion?

4. Are there pending charges for a misdemeanor specified in 5(D)(3)?

Regulatory Action Disclosure

E. In the past 10 years, has any state or federal regulatory agency or foreign financial regulatory authority ever:

1. Found the entity or a control affiliate to have made a false statement or omission or been dishonest, unfair or unethical?

2. Found the entity or a control affiliate to have been involved in a violation of a financial services-related regulation(s) or statute(s)?

3. Found the entity or a control affiliate to have been a cause of a financial services-related business having its authorization to do business denied, suspended, revoked or restricted?

4. Entered an order against the entity or a control affiliate in connection with a financial services-related activity?

F. Has the entity's or a control affiliate's authorization to act as an attorney, accountant, or State or federal contractor ever been revoked or suspended?

G. Is there a pending regulatory action against the entity or a control affiliate for any alleged violation described in E. & F.?

Civil Judicial Disclosure

H. Has any domestic or foreign court:

1. In the past ten years enjoined the entity or a control affiliate in connection with any financial services-related activity?

2. In the past ten years found the entity or a control affiliate was involved in a violation of any financial services-related statute(s) or regulation(s)?

3. In the past ten years dismissed, pursuant to a settlement agreement, a financial services-related civil action brought against the entity or a control affiliate by a state, federal, or foreign financial regulatory authority?

I. Is there a pending financial services-related civil action in which the entity or a control affiliate is named for any alleged violation described in H.?

Customer Arbitration/Civil Litigation Disclosure

J. Have you ever been named as a respondent/defendant in a financial services-related consumer-initiated arbitration or civil litigation which:

1. is still pending; or

2. resulted in an arbitration award or civil judgment against you, regardless of amount, or that required corrective action; or

3. was settled for any amount?

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NEW APPLICATION ATTESTATION

EXECUTION:

I, _____ (Full Name), _____ (Title/Position), am employed by or am an officer or a control person of _____ (Applicant). Applicant agrees to and represents the following:

1. That the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part of this application, are current, true, and complete and are made under the penalty of perjury, or un-sworn falsification to authorities, or similar provisions as provided by law;
2. To the extent any information previously submitted is not amended, such information remains accurate and complete;
3. That the State of Alaska, to which the application is being submitted, may conduct any investigation into the background of the Applicant and any related individuals or entities, in accordance with all laws and regulations for purposes of making a determination on the application;
4. To keep the information contained in this form current and to file accurate supplementary information on a timely basis; and
5. To comply with the provisions of law, including the maintenance of accurate books and records, pertaining to the conduct of business for which the Applicant is applying.

If the Applicant has knowingly made a false statement of a material fact in this application or in any documentation provided to support the foregoing application, the foregoing application may be denied.

On this _____ (MM/DD/YYYY), I verify that I am the named person above and that I am authorized to attest to and submit this filing on behalf of the Applicant. I solemnly swear (or affirm) under the penalty of perjury or un-sworn falsification to authorities, or similar provisions as provided by law that I have reviewed the foregoing responses, have made diligent inquiry as to their accuracy, and they are true and correct to the best of my knowledge, information, and belief.

(Signature of Attestant)

(Printed name of Attestant)

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20_____.

NOTARY SEAL

(Signature of notary public)

County of: _____

Notary public state of: _____

My commission expires: _____

<h1>MU2</h1>	<h2>Biographical Statement & Consent Form</h2>				Date of Filing	
1. Individual's Identifying Information:						
First Name		Middle Name		Last Name		Suffix
Social Security Number:				Gender:		
Date of Birth:		State/Province of Birth:			Country of Birth:	
List all names, other than your legal name, you have used or are using, or which you are or were know since 18 years of age. This should include nicknames, aliases, & names used before or after marriage. (Use additional sheets as needed.)						
Name		Name		Name		Name
Employer Name:						
Office of Employment Address				Check box if this is your private residence.		
Number & Street (No P.O. Boxes)		City		State	Country	Postal Code
Current Residential Address (if different from Employment Address)						
P.O. Box or Number & Street		City		State	Country	Postal Code
Business Phone		Ext.	Fax Number		Ext.	Mobile Phone
Primary Email						
2. Residential History: Starting with current address, give all addresses for the past 10 years. (Attach additional pages as needed.)						
From MM/YY	To MM/YY	Address	City	State / Province	Postal Code	Country

3. Employment History: Provide complete employment history for the past 10 years. Account for all time including full & part time employments, self-employment, military service, and homemaking. Also include periods such as unemployment, full-time student, extended travel, etc. Indicate "Yes" or "No" for employment in financial service-related businesses. (Attach additional pages as needed.)

From MM/YY	To MM/YY	Employer	Position	State / Province	Postal Code	Country	Yes or No

4. Other Business: Are you currently engaged in any other business, either as a proprietor, partner, officer, Yes No
director, employee, trustee, agent, or otherwise?

(Please exclude non-financial services-related activity that is exclusively charitable, civic, religious, or fraternal, and is recognized as tax exempt.) If "Yes", provide the following details: the nature of said business; your position, title, or relationship with said business; the start date of said relationship; approximate number of hours per month devoted to said business; briefly describe your duties relating to said business. (Attach additional pages as needed.)

5. Disclosures Please provide complete details for all "Yes" answers. (Attach additional pages of all events and/or proceedings.)	
Financial Disclosure	
Within the past ten years:	
Have you filed a personal bankruptcy petition or been subject of an involuntary bankruptcy petition?	
Based upon events that occurred while you exercised control over an organization, has said organization filed a bankruptcy petition or been subject of an involuntary bankruptcy petition?	
Have you been the subject of a foreclosure action?	
Has a bonding company ever denied, paid out on, or revoked a bond for you?	
Based upon activities that occurred while you exercised control over an organization, has any bonding company ever denied, paid out on, or revoked a bond for said organization?	
Do you have any unsatisfied judgements or liens against you?	
Are you delinquent on any court orders child support payments?	
Criminal Disclosure	
Have you ever been convicted of, or pled guilty, or nolo contendere (no contest) in a domestic, foreign, or military court to any felony?	
Are there pending charges against you for any felony?	
Based upon activities that occurred while you exercised control over an organization, has said organization ever:	
Been convicted of, or pled guilty, or nolo contendere (no contest) in a domestic, foreign, or military court to any felony?	
Been charged with any felony?	
Have you ever been convicted of, or pled guilty, or nolo contendere (no contest) in a domestic, foreign, or military court to a misdemeanor involving financial services-related businesses; fraud, false statements, or omissions; theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or conspiracy to commit any of these offenses?	
Are there pending charges against you for a misdemeanor as described above?	
Based upon activities occurring while you exercised control over an organization, has said organization ever:	
Been convicted of, or pled guilty, or nolo contendere (no contest) in a domestic, foreign, or military court to a misdemeanor as described above?	
Been charged with a misdemeanor as described above?	
Civil Judicial Disclosure	
Has any domestic or foreign court ever:	
Enjoined you in connection with any financial services-related activity?	
Found that you were involved in a violation of any financial services-related statute(s) or regulation(s)?	
Dismissed, pursuant to a settlement agreement, a financial services-related civil action brought against you by a State, Federal, or foreign financial regulatory authority?	
Are you named in any pending financial services-related civil action that could result in a "Yes" to the other Civil Judicial questions?	

5. Disclosures - Continued	
Regulatory Action Disclosure	
Has any State, Federal, or foreign financial regulatory authority ever:	
Found you to have made a false statement or omission or been dishonest, unfair, or unethical?	
Found you to have been involved in a violation of a financial services-related statute(s) or regulation(s)?	
Found you to have been a cause of a financial services-related business having its authorization to do business denied, suspended, revoked, or restricted?	
Entered an order against you in connection with a financial services-related activity?	
Denied, suspended, or revoked your registration or license, disciplined you, or otherwise by order, prevent you from associating with a financial services-related business or restricted your activities?	
Barred you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in financial services-related business?	
Issued a final order based on violations of any law or regulation that prohibits fraudulent, manipulative, or deceptive conduct?	
Have you ever had an authorization to act as an attorney, accountant, or State or Federal contractor that was revoked or suspended?	
Are you now the subject of any regulatory proceeding that could result in a "Yes" to the other Regulatory Action questions?	
Customer Arbitration / Civil Litigation Disclosure	
Have you ever been named as a respondent/defendant in a financial services-related consumer-initiated arbitration or civil litigation which:	
Is still pending; or	
Resulted in an arbitration award or civil judgement against you, regardless of amount, or that required corrective action; or	
Was settled for any amount?	
Termination Disclosure	
Have you ever voluntarily resigned, been discharged, or permitted to resign after allegations were made that accused you of:	
Violating statutes, regulations, rules, or industry standards of conduct?	
Fraud, dishonesty, theft, or the wrongful taking of property?	

On this _____ (MM/DD/YYYY), I verify that I am the named person above and that I am authorized to attest to and submit this filing on my own behalf. I solemnly swear (or affirm) under the penalty of perjury or un-sworn falsification to authorities, or similar provisions as provided by law that I have reviewed the foregoing responses, have made diligent inquiry as to their accuracy, and they are true and correct to the best of my knowledge, information, and belief.

(Signature of Applicant)

(Printed name of Applicant)

Alaska Premium Finance Company Affidavit

AS 06.40, 3 AAC 07

I, _____, being first duly sworn upon oath, depose and say based on my personal knowledge, information, and belief:

1. I am employed by: _____ as its _____.
2. I am authorized to execute this Affidavit on behalf of the Applicant.
3. The Applicant has applied to be licensed as a Premium Finance Company with the Administrator of the Alaska Division of Banking and Securities.
4. I acknowledge that the Administrator wishes to determine whether the Applicant has engaged in Premium Finance activities in Alaska. I have conducted a review of the Applicant's records, and made diligent inquiry in this regard.
5. I understand that this Affidavit constitutes a statement to the Administrator, pursuant to AS 06.55, and that filing a false statement to the Administrator in a violation of the Alaska Premium Financing Act, and grounds for action against the Affiant and the Applicant.
6. The Affiant and the Applicant hereby certify:

A. The Applicant, directly or indirectly, by telephone, by electronic means, by mail, via the Internet, in person, or by the Applicant itself, **HAS NOT** provided or **HAS NOT** offered to provide Premium Finance activities in the State of Alaska, and **WILL NOT** engage in Premium Finance activities in Alaska until duly licensed with the Administrator.

B. The Applicant, directly or indirectly, by telephone, by electronic means, by mail, via the Internet, in person, or by the Applicant itself, **HAS** provided or **HAS** offered to provide Premium Finance activities in the State of Alaska. Attached to this Affidavit is a listing of the names, addresses, and phone numbers of all Alaska customers; transaction dates; descriptions of the transactions; specific exemptions relied upon, in any; and the amount of fees generated for each Alaska customer. If the applicant or authorized delegate has engaged in advertising of Premium Finance activities, provide a copy of the advertising, the date distributed, and the number of Alaska consumers who received it.

Signed this day, the _____ day of _____, 20_____.

(Signature of Affiant)

(Printed name of Affiant)

SUBSCRIBED AND SWORN to before me this _____ day of _____ 20_____.

NOTARY SEAL

(Signature of notary public)

County of: _____

Notary public state of: _____

My commission expires: _____

Alaska Premium Finance Act Bond Form

Bond # _____

KNOW ALL PERSONS BY THESE PRESENTS, that _____,
duly authorized to do business in the State of Alaska and having its principal place of business in the City of _____, State of _____, as Principal, and _____, and having its principal place of business in the City of _____, State of _____, who is duly authorized to engage in business in Alaska as Surety, are both held and firmly bound unto the STATE OF ALASKA in the full penal sum of _____ DOLLARS (\$_____) lawful money of the United State, for payment of which, well and truly to be made, we hereby bind ourselves, our heirs, administrators, executors, successors and assigns, jointly and severally, firmly by these presents.

This obligation secures the faithful performance of the obligations of the principal as the premium finance company licensee, including its officers, individuals, employees, and authorized delegates with respect to the Premium Finance Act, AS 06.40 and 3 AAC 07.

If the principal fully conforms to and abides by the provisions of the said Act and of all rules and regulations lawfully made by the licensing official thereunder and will pay to the State of Alaska and to any person or persons who may have a cause of action against the obligor of said bond under the provision of said Act any and all moneys that may become due or owing to the State or to such person or persons from said obligor under and by virtue of the provisions of this Act, then this obligation shall be null and void, otherwise to remain in full force and effect.

This bond may be cancelled by the surety on 30 days of written notice to the Director, Division of Banking and Securities, PO Box 110807, Juneau, AK 99811-0807. Provided, however, such notice shall not affect any liability arising prior to the effective date of cancellation of this bond and the PRINCIPAL and SUREY shall be and remain liable for a period of five (5) years from the date of cancellation.

PROVIDED, that the total liability hereunder for all causes of action arising during the period for which this bond is written shall not exceed the principal sum of this bond.

Alaska Premium Finance Act Bond Form

IN WITNESS WHEREOF, the said principal has hereunto set her/his hand and seal, and the said Surety has caused these presents to be signed and its corporate seal to be hereunto affixed the day and year first above written.

Signed, sealed, and dated this _____ day of _____, 20_____.

SEAL

By: Principal: _____

Signature: _____

Title: _____

SEAL

By: Surety: _____

Signature: _____

Attorney-In-Fact: _____



State of Alaska
Department of Commerce, Community, and Economic Development
Division of Banking and Securities
333 Willoughby Avenue, 9th Floor, Juneau, Alaska 99801
Telephone: 907-465-2521
Website: <http://commerce.state.ak.us/dnn/dbs/>

**ALASKA PREMIUM FINANCE COMPANY
STATE REGULATOR QUESTIONNAIRE FOR AS 06.40 APPLICANTS**

APPLICANT: This form is for initial application only. A copy of it must be mailed/emailed promptly to the states in which you are licensed to engage in premium finance lending. This state must have enacted statutes and regulations similar to AS 06.40 *et. seq.* and 3 AAC 07. Complete the upper portion of the form by typing or printing the required information. Please request the receiving state submit this document to the State of Alaska via email at loanentity.licensing@alaska.gov

Date: _____

Full Name of Premium Finance Company: _____

Physical Address: _____

City / State / Zip Code: _____

State: _____ Date Licensed: _____ Expiration Date: _____

License #: _____ Type of License: _____

STATE: The above-named company has applied for a license to conduct deferred deposit advances in Alaska. The applicant purports to be licensed and regulated by you. As part of our review of the applicant's qualification and suitability for a license, we request information on your experience with this applicant. Please complete the following and return to us via email at loanentity.licensing@alaska.gov

YES NO

1. Is the above information accurate?
2. Did you conduct an investigation of this applicant prior to issuing a license?
3. Have you received any complaints about this applicant?
(Please explain any trend of common complaints)
4. Have you taken action against this licensee for violations of your state's laws?
(Attach a copy of the action or briefly describe the circumstances and resolution)
5. Have you conducted an examination or audit of the applicant's business?
(Provide the date of the last examination and briefly describe the most serious exceptions)

This form completed by:

Name: _____ Signature: _____

Title: _____ State Agency: _____

Address: _____ Phone: _____ Date: _____



Premium Finance Annual Report

Completed as a fill-in document, hand-written no longer accepted. Legible photocopies with original signatures are acceptable. Fully complete all forms; insert "N/A" or "NOT Applicable" where appropriate. When space is insufficient, use a separate page. Information on inserted pages must reference appropriate section. The applicant provides, under oath, the application, supplemental pages, and other related information.

This report should be filed with the Division of Banking and Securities no later than **March 15**.

Email report to: loanentity.licensing@alaska.gov

For the period ending December 31, 20	
General Information	
Company: _____	License #: _____
Street Address: _____	
City: _____	State: _____ Postal Code: _____
Business Phone #: _____	Fax #: _____
Toll Free #: _____	Website: _____
Primary Contact: _____	Email: _____
Provide the information requested below for the individual or company being identified as a executive officer. Please attach additional pages, if space below is inadequate.	
Name: _____	Title: _____
Name: _____	Title: _____
Name: _____	Title: _____
Name: _____	Title: _____
Name: _____	Title: _____
Name: _____	Title: _____
Name: _____	Title: _____
If change of ownership for any reason has occurred within the past 12 months, attach detailed statement with full particulars.	
Please attach financial report, if audited by an outside firm.	
Please complete the Balance Sheet & Comparative Statement below, if no audited report provided.	
Agent Information	
List all insurance agents for whom you are providing a market source for the financing of Alaska premium finance contracts. This information must be provided, but can be provided by separate attachment.	
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Premium Finance Annual Report		
Branch Information		
Licensed Branch: _____		
Street Address: _____		
City: _____	State: _____	Postal Code: _____
Business Phone #: _____	Fax #: _____	
Branch Manager: _____		Email: _____
For the period ending December 31, 20		
Alaska Based Account Information	End of Present Period	End of Previous Period
# of AK Accounts Originated (Personal)		
\$ balance of AK Accounts Originated (Personal)		
# of AK Accounts Originated (Commercial)		
Total # of AK Accounts Originated		
Total \$ balance of AK Accounts Originated		
Licensed Branch: _____		
Street Address: _____		
City: _____	State: _____	Postal Code: _____
Business Phone #: _____	Fax #: _____	
Branch Manager: _____		Email: _____
For the period ending December 31, 20		
Alaska Based Account Information	End of Present Period	End of Previous Period
# of AK Accounts Originated (Personal)		
\$ balance of AK Accounts Originated (Personal)		
# of AK Accounts Originated (Commercial)		
Total # of AK Accounts Originated		
Total \$ balance of AK Accounts Originated		
Licensed Branch: _____		
Street Address: _____		
City: _____	State: _____	Postal Code: _____
Business Phone #: _____	Fax #: _____	
Branch Manager: _____		Email: _____
For the period ending December 31, 20		
Alaska Based Account Information	End of Present Period	End of Previous Period
# of AK Accounts Originated (Personal)		
\$ balance of AK Accounts Originated (Personal)		
# of AK Accounts Originated (Commercial)		
Total # of AK Accounts Originated		
Total \$ balance of AK Accounts Originated		
Please attach additional pages, if space above is inadequate.		

Premium Finance Annual Report

Attestation

Execution:

I, _____ (Full Name), _____ (Title/Position), am employed by or am an officer or a control person of _____ (Licensee). Licensee agrees to and represents the following:

1. That the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part of this annual report, are current, true, and complete and are made under the penalty of perjury, or un-sworn falsification to authorities, or similar provisions as provided by law;
2. To the extent any information previously submitted is not amended, such information remains accurate and complete;
3. To keep the information contained in this form current and to file accurate supplementary information on a timely basis; and
4. To comply with the provisions of law, including the maintenance of accurate books and records, pertaining to the conduct of business for which the license is issued.

If the Licensee has knowingly made a false statement of a material fact in this annual report or in any documentation provided to support it, the annual report may be deemed invalid.

On this _____ (MM/DD/YYYY), I verify that I am the named person above and that I am authorized to attest to and submit this filing on behalf of the Licensee. I solemnly swear (or affirm) under the penalty of perjury or un-sworn falsification to authorities, or similar provisions as provided by law that I have reviewed the foregoing responses, have made diligent inquiry as to their accuracy, and they are true and correct to the best of my knowledge, information, and belief.

Signature of Attestant

Printed Name of Attestant

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____.

Notary Seal

Signature of Notary Public

County of: _____

State of: _____

Commission Expires: _____

Premium Finance Annual Report		
Balance Sheet (Formerly Schedule D)		
Please complete the Balance Sheet, if no audited report provided with Annual Report.		
For the period ending December 31, 20		
Assets	End of Present Period	End of Previous Period
Cash on hand and in bank:		
Loans receivable:		
Real estate:		
Leasehold improvements, furniture, fixtures, and equipment (less reserve for depreciation):		
Deferred charges:		
Other assets:		
Total assets:		
Liabilities	End of Present Period	End of Previous Period
Accounts payable:		
Notes payable (current portion):		
Accruals:		
Other liabilities:		
Total current liabilities:		
Notes payable (long-term):		
Other long-term liabilities:		
Total long-term liabilities:		
Net Worth	End of Present Period	End of Previous Period
Capital or partnership equity:		
Surplus:		
Undivided earnings:		
Total net worth:		
Total liabilities & net worth:		
Please complete the Balance Sheet, if no audited report provided with Annual Report.		

Premium Finance Annual Report		
Comparative Statement of Income & Expenses (Formerly Schedule E)		
Please complete the Comparative Statement of Income & Expenses, if no audited report provided with Annual Report.		
For the period ending December 31, 20		
Income	End of Present Period	End of Previous Period
Contract Income:		
Other Income:		
Total Income:		
Expenses	End of Present Period	End of Previous Period
Salaries:		
Occupancy:		
Office Expenses & Supplies:		
Bad Debt:		
Depreciation:		
Legal:		
Interest of Borrowed Funds:		
Total Expenses:		
	End of Present Period	End of Previous Period
Net Operating Income:		
Income Taxes:		
Net Income:		
Please complete the Comparative Statement of Income & Expenses, if no audited report provided with Annual Report.		