



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Pkwy, Suite 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

BUSINESS ENTITY

RESIDENT AND NONRESIDENT INSURANCE LICENSE

MAINTAIN BRANCH LOCATION FILING FORM

☐ NEW BRANCH OPEN DATE: _____

☐ CLOSE BRANCH CLOSE DATE: _____

① Business Entity Name and Nevada License number.		② Incorporation/Formation Date (month)____(day)____(year)		③ FEIN -	
④ DBA (Provide Nevada County Clerk Filing if required by county)		⑤ State of Domicile		⑥ Country of Domicile	
⑦ If applicable, NASD Firm Central Registration Depository (CRD) Number		⑧ Is the business entity affiliated with a financial institution/bank? Yes <input type="checkbox"/> No <input type="checkbox"/>			
⑨ Additional Location Business Address		⑩ City		⑪ State	⑫ Zip or Foreign Country
⑬ Phone Number () -	⑭ Fax Number () -	⑮ Business Web Site Address		⑯ Business E-Mail Address	
⑰ Mailing Address		⑱ P.O. Box	⑲ City	⑳ State	㉑ Zip or Foreign Country
Designated/Responsible Licensed Producer Signature or Officer Signature					
㉒ Identify at least one Designated/Responsible Licensed Producer for the above additional location: If the person listed below has not already been affiliated to the business entity, the person must also complete a license application/affiliation form and pay the applicable fees.					
Name _____		SSN _____ - ____ - ____			
Name _____		SSN _____ - ____ - ____			
Name _____		SSN _____ - ____ - ____			
Name _____		SSN _____ - ____ - ____			

Individual associations and terminations may be submitted online through [Sircon's Compliance Express](http://www.sircon.com/nevada) at www.sircon.com/nevada. The modification/affiliation fee is \$50 plus any online processing fees.

Email completed form to Nevada.licensing@doi.nv.gov.