



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) 687-0797 Web: doi.nv.gov

BUSINESS ENTITY

RESIDENT AND NONRESIDENT INSURANCE LICENSE

ADDITIONAL LOCATION FILING FORM

Filing Fee of \$10.00 required

Fees are payable by check or money order to the Nevada Division of Insurance, and are nonrefundable.

Division Use Only: Fees: _____	Check #: _____	Application ID#: _____	ORG ID # _____
Approved by: _____	Date: _____	License No: _____	

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					
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 \$60 plus any online processing fees.