

Signature: ____

(REQUIRED)

CORPORATE 2019 ANNUAL FILING FORM

Full Legal Name
Licence Number (optional)
Licence Class: (check one only. Submit one form and one fee PER licence).
☐ Life and Accident and ☐ Accident and Sickness ☐ General ☐ Adjuster ☐ Travel Sickness
FILING FEES AND DEADLINES
Payment received by end of day Monday June 3, 2019 \$225.00
Payment received by end of day Tuesday August 6, 2019 \$425.00 (includes late filing fee)
funds only. Annual filings can be processed <u>online</u> or this form can be submitted with payment in person or by mail. ☑ Cheques and money orders must be made payable to the Insurance Council of British Columbia . ☑ Your cheque and filing will not be processed and will be returned to you if: • Cheque and filing form are not fully completed and signed • White-out is used on the cheque
Send this form and your payment by the deadline above to: Insurance Council of British Columbia Suite 300, 1040 West Georgia Street, PO Box 7 Vancouver, BC V6E 4H1
FILING CONFIRMATION Licensees are encouraged to submit their filing payments online as online filings will be updated immediately. If you submit your filing by mail, you will need to check the status of your licence on the <u>Licensee Directory</u> on Council's website. If your next filing date shows as June 1, 2020 on your licence, your filing has been processed.
NOMINEE DECLARATION In making this annual filing, I confirm that the agency/firm is in compliance with all <u>Council Rules</u> , which may include, but are not limited to, requirements relating to mandatory errors and omissions insurance, authority to represent at least one insurer, and all mandatory disclosures to Council. I understand that if Council has not received the corporate filing by the deadline shown above, the corporate licence will be automatically terminated on Wednesday, August 7, 2019, and the agency/firm will be required to reapply for its licence.

_____ Print Name: ____

(REQUIRED)