



LOUISIANA DEPARTMENT OF INSURANCE

TIMOTHY J. TEMPLE
COMMISSIONER

**AFFIDAVIT OF NON-RESIDENT INDIVIDUAL TITLE INSURANCE
PRODUCER (APPLICATION FOR NEW LICENSE)**

BEFORE ME, the undersigned authority, personally came and appeared the following affiants:

1) _____ (hereinafter "**Non-Resident Title Insurance Producer**"), a non-resident
(Applicant)
individual title insurance producer, licensed in the state of _____ as a resident producer for
the line of title; and

2) _____, as an authorized representative of _____
(Representative of Resident Agency Producer) (Name of Resident Agency Producer)
(hereinafter "**Resident Agency Producer**"), an insurance agency producer licensed for the line of title in Louisiana;
and, who, after being individually sworn, did depose and affirm that:

A) The **Resident Agency Producer** is a resident agency producer licensed in Louisiana for the line of title
and has a Louisiana producer license number of: _____.

B) Once the **Non-Resident Title Insurance Producer** is licensed, the **Resident Agency Producer** will
properly affiliate the **Non-Resident Title Insurance Producer** with **Resident Agency Producer** pursuant
to La. R.S. 22:1546B.

C) The **Non-Resident Title Insurance Producer** has filed an application for a non-resident individual title
insurance producer license and has a National Producer Number (NPN) of: _____.

D) Check One:

____ Upon licensure, the **Non-Resident Title Insurance Producer** will be a full-time employee of the
Resident Agency Producer as contemplated in La. R.S. 22:512(9.1) but will not serve as the
Resident Agency Producer's designated individual producer.

____ Upon licensure, the **Non-Resident Title Insurance Producer** will be a full-time employee of the
Resident Agency Producer as contemplated in La. R.S. 22:512(9.1) and will further serve as the
Resident Agency Producer's designated individual producer. The **Non-Resident Title Insurance
Producer** has never had his/her insurance producer license suspended, revoked, or denied by any
court or agency in any jurisdiction.

Signature of **Resident Agency Producer** Representative

Printed Name of **Resident Agency Producer** Representative

Signature of **Non-Resident Title Insurance Producer**

Printed Name of **Non-Resident Title Insurance Producer**

SWORN TO and subscribed before me this _____ day of _____, 20_____.

Notary Public or Bar Roll Number

Signature of Notary Public

My Commission Expires _____

Printed Name of Notary Public