



**LOUISIANA
DEPARTMENT OF
INSURANCE**

ADDING A TRADE NAME TO A PRODUCER OR ADJUSTER LICENSE

Submit form to producerlicensing@ldi.la.gov

Licensee Information:

Licensee Name: _____

Louisiana License Number or NPN: _____

Business Address: _____

Mailing Address: _____

Phone: _____ Business email: _____

Business email: _____

Trade Name Information:

I wish to add the TRADE NAME below to my license. I confirm that I have already registered this trade name with the Louisiana Secretary of State.

Trade Name: _____

(Licensee Signature)

(Date)

If licensee is a business entity:

(Printed Name of Signee)

(Title of Signee)

