COMMERCIAL AUTOMOBILE INSURANCE PLAN PERSONAL AUTOMOBILE INSURANCE PLAN

FRANK J. PENSABENE, AIS, API Director and Resident Manager

MARITERESE A. ZALUPSKI
Operations Manager

ADDITION/DELETION OF AGENCY EMPLOYEES

To assist the Plan in processing your requests accurately and efficiently, please complete the checklist below and the attached Add/Delete form. Thank you for your cooperation.

Please be advised all employee producers and principals are required to attend the PAIP/CAIP Producer Procedure Course, prior to being added to the certification.

Addition/Deletion of Employee Producers			
	Attached Add/Delete form fully completed Current copies of Property Casualty Licenses included for each employee Copy of PAIP/CAIP Producer Procedure Course Certificate of Attendance		
Addition/Deletion of Principals Attached Add/Delete form fully completed			
	Current copies of Property Casualty Licenses included for each principal Copy of PAIP/CAIP Producer Procedure Course Certificate of Attendance Copy of Manual Certification of License Status with the principals listed		

If an agency principal is being added and/or deleted, you must first notify the Department of Banking and Insurance. Once the change has been recorded with DOBI, please contact the Licensing Division at the DOBI and request a copy of the "Manual Certification of License Status" and include with your request. The telephone number for the DOBI is (609) 292–4337. Please note, that agency principals cannot be added or deleted to your certification list without first notifying the DOBI.

Edition Date 07/24/09

ADDITION(S)/DELETION(S)

Agency Name	Agency License	Agency License Number	
Request the addition/deletion of the follo	owing representatives to/from our cer	tification:	
Employee Producer Name	License Number	Signature	
Employee Producer Name	License Number	Signature	
Employee Producer Name	License Number	Signature	
Agency Principal Signature			
Addition/Deletion of Principals If an agency principal is being added and Once the change has been recorded with I the "Manual Certification of License Statu 292-4337. Please note, that agency princi	d/or deleted, you must first notify the DOBI, please contact the Licensing Divis" and include with your request. The	ision at the DOBI and request a copy of telephone number for the DOBI is (609)	
the DOBI. Please be advised all employee produ Procedure Course, prior to being added	to the certification.		
Request the addition/deletion of the f	following principals to/from our ce	ertification:	
Principal Name	License Number	Signature	
Principal Name	License Number	Signature	
Principal Name	License Number	Signature	
Agency Principal Signature			

* Please be reminded, the Plan must receive written verification of agency principals from the Department of Banking & Insurance before requests can be processed.

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