



National Association of
Professional Surplus Lines
Offices, Ltd.

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ASSOCIATE MEMBERSHIP DEFINITIONS & CRITERIA

Definition

Defined as an individual, firm or organization that does not qualify for voting membership, but supplies services to voting members and/or supports the wholesale and excess and surplus lines system. This may include but is not limited to: alien insurance companies, reinsurance companies, reinsurance intermediaries, law firms, premium finance firms, software vendors, Lloyd's of London syndicates, Lloyd's of London brokers, state stamping offices, state surplus lines associations and claims adjusters.

Criteria

1. Be operating in the wholesale insurance business under its current ownership and management for at least two (2) years.
2. Represents a legitimate service to existing NAPSLO members and the surplus lines industry.
3. Not eligible for any other NAPSLO membership class.

If an Associate member applicant is a non-United States or non-Canadian domiciled insurance company or risk bearing entity, the following membership criteria will apply:

1. Meets the annual written premium criteria and minimum capital and surplus criteria applied to Company member applicants.
 - a. Transact annual written premiums of more than \$5 million.
 - b. Have a minimum of \$15 million in capital and surplus.
2. Has established a trust fund of not less than \$5.4 million for the benefit of U.S. surplus lines policyholders.
3. Is listed on the National Association of Insurance Commissioners International Insurance Department's List (IID List).
4. Demonstrates support in the United States of the wholesale insurance distribution system.



ASSOCIATE MEMBERSHIP APPLICATION

Thank you for your interest in joining the NAPSLO membership. The information included in this application will be reviewed by NAPSLO's Membership Committee as required by the Association's bylaws and is confidential. Submission of this application does not constitute automatic acceptance of membership. *Please do not send dues payment with this application.*

1. Name of Applicant Firm

2. Address _____

City _____ State/Zip _____

3. Applicant Name & Title Primary Firm Contact

Name _____ Title _____

Telephone _____ Fax _____

E-Mail _____ Web Site _____

4. NAPSLO's membership criteria requires that the Applicant Firm has operated in the wholesale insurance industry under its current ownership and management for at least two years. Does the Applicant Firm meet this criteria?

Yes No

Please provide the date the Applicant Firm established its operation.

Date _____

5. Please check if any of the following applies to the Applicant Firm.

- Lloyd's Syndicate/Underwriter
- Reinsurance Company or Alien Insurance Company
- U.S. Reinsurance Intermediary
- Lloyd's Broker
- Other

If the Applicant Firm is a Lloyd's broker, please provide the following:

Date approved by committee of Lloyd's. _____

Please list any areas of specialization. _____

6. Describe the Applicant Firm's business activities and how the Applicant Firm provides support to wholesale brokers/agents and/or surplus lines companies/underwriting managers.

7. Please provide any other information which will help clarify the Applicant Firm's role in the wholesale insurance industry.

Please complete questions 8 through 12 only if the Applicant Firm is a non-United States or non-Canadian domiciled insurance company or risk bearing entity. NAPSLO's membership criteria requires that the Applicant Firm meet all of the following to qualify for membership. Please attach any documentation to support the answers provided in this application.

8. Does the Applicant Firm transacts at least \$5 million in annual premium volume?

Yes No

Please list the Applicant Firm's total premium volume for the last three years.

Year	Premium Volume

9. Does the Applicant Firm have a minimum of \$15 million in capital and surplus?

Yes No

Please list the Applicant Firm's total capital and surplus for the last three years.

Year	Capital and Surplus

10. Does the Applicant Firm have an established trust fund of more than \$5.4 million for the benefit of U.S. surplus lines policyholders?

Yes No

If yes, how much? _____

11. Is the Applicant Firm listed on the National Association of Insurance Commissioners International Insurance Department's List (IID List)?

Yes No

12. If the Applicant Firm is a reinsurance intermediary, list all states in which the Applicant Firm is licensed as a reinsurance intermediary.

Please forward reference form (included in application packet) to your two selected NAPSLO **voting** member firms so they may be completed and mailed or e-mailed by **an executive officer or principal of those firms**. These completed reference forms must be submitted to the NAPSLO office. Reference forms must be submitted to NAPSLO voting members who know you in your current business capacity. A NAPSLO voting member is a wholesale broker, company or underwriting manager member of NAPSLO. NAPSLO associate members may not be used as references. Applications for membership cannot be processed until the above completed reference forms are received at the NAPSLO office.

In making this application for membership to NAPSLO, I do declare the facts given herein are true to the best of my knowledge. I further declare compliance with the membership requirements and I have read and agree to comply with NAPSLO's code of ethics.

NAPSLO CODE OF ETHICS

Members of the Association agree:

1. To maintain high professional standards of efficiency, conduct, integrity, responsibility and services.
2. To exercise the utmost good faith in dealing with their principals, underwriters and assureds.
3. To refrain from maintaining or using the status of the profession, or affiliation with the Association, to attract business for personal financial gain in other lines of endeavor.
4. To refrain from maintaining or using their membership within the Association as a means of taking unfair advantage of competitors, or for any other purpose than those for which the Association is intended.
5. To regard the business of insurance as an unusual opportunity to provide essential services to the public, and to conduct themselves with dignity, courtesy and the highest degree of fairness in their relations with members of the industry and the public at large.
6. To be governed by a spirit of cooperation, helpfulness and frankness in their relationships with fellow members to the end that each shall be better equipped through such cooperative measures and exchange of ideas to better perform and function, and to foster the advancement and prestige of their profession.
7. To comply with applicable surplus lines laws and regulations, maintain necessary licenses and immediately notify the Association of any suspensions, revocation or termination of such licenses.

Signed _____

Title _____ Date _____

DO NOT SEND MEMBERSHIP DUES PAYMENT WITH THIS APPLICATION.
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Note: A change in ownership necessitates immediate advice of same to the NAPSLO office along with a new completed application.