

**COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION, BUREAU OF INSURANCE**

**HOME SERVICE CONTRACT PROVIDER
APPLICATION FOR RENEWAL OF LICENSE IN VIRGINIA
BEGINNING JULY 1, 2017**

Company Code

(Full and Exact Corporate Name of Home Service Contract Provider)

(Full Corporate Address, Give Street and Number, City, State and Zip)

(Administrative Mailing Address, if different from above)

organized under the laws of _____ hereby certifies that it is in compliance with the applicable laws of the Commonwealth of Virginia and applies for renewal of its license to provide in the Commonwealth of Virginia home service contracts for which it was licensed as of the license year ending June 30 next preceding the effective date of the license herein applied for. Said company further certifies that it is duly authorized to transact in its State of Domicile the class of business for which it hereby makes application.

HOME SERVICE CONTRACT PROVIDERS MUST SUBMIT THIS FORM IN HARDCOPY ALONG WITH A CHECK MADE PAYABLE TO THE TREASURER OF VIRGINIA FOR THE \$500 ANNUAL RENEWAL FEE.

Dated and signed this _____ day of _____, 20____ at _____.

_____, being duly sworn according to law, deposes and
(Name of Officer)

says that the declarations contained in this application are true and correct.

(Signature of Officer)

(Title)