

**WEST VIRGINIA**  
**OFFICES of the INSURANCE COMMISSIONER**

**2009 LATE RENEWAL APPLICATION FOR  
SURPLUS LINES LICENSEES**  
for License Year 6-1-2009 thru 5-31-2010

WV License # \_\_\_\_\_

PRINT Full Name: \_\_\_\_\_  
\_\_\_\_\_  
(Last) (First) (Middle)

Residence Mailing Address:  
\_\_\_\_\_  
\_\_\_\_\_

Check if this is a new address

**Residents** -- If you have moved from West Virginia to another state, contact our office before proceeding.

**Non-Residents** – If you have moved to another state, you must hold a resident license in your new state of domicile. We will verify your license status through the NAIC's Producer Database.

**CASH cannot be accepted. Payment must be made by check or money order.**

Please record:

**CHECK #** \_\_\_\_\_

**Date of Check** \_\_\_\_\_

**AMOUNT: \$300.00 (payable to WV Offices of the Insurance Commissioner)**

Attached is the \$300.00 fee for renewal of my West Virginia Surplus Lines license.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Renewed license can be printed from [www.wvinsurance.gov](http://www.wvinsurance.gov), **ONLINE LICENSE PRINT**, after payment has been received and posted.

Mail Late Renewal form, fee and attachments, if any, to:

<b>WVOIC-Agents Licensing &amp; Education</b>	<b>or</b>	<b>Overnight Address:</b>
<b>PO Box 50541</b>		<b>1124 Smith St.</b>
<b>Charleston WV 25305-0541</b>		<b>Charleston WV 25301</b>