



DEPARTMENT OF INSURANCE
State of North Carolina

1204 MAIL SERVICE CENTER
RALEIGH, NC 27699-1204

JIM LONG
COMMISSIONER OF INSURANCE

PUBLIC SERVICES GROUP
AGENT SERVICES DIVISION
(919) 807-6800

TO: Adjusting Firms
FROM: Etta Maynard
DATE: November 18, 2008
RE: Appointment and Termination Reconciliation

North Carolina must receive terminations of appointments by February 15, 2009. Your company will be billed for those individuals showing appointed after February 15, 2009 on your 2009-2010 annual renewal invoice.

Attached is Form D2-06 for termination of North Carolina appointments for adjusters. This form must be filed for each adjuster that your company does not wish to renew for the 2009-2010 renewal period. If the license is available, the cancellation part of the license can be submitted as a termination request. Your company may request a list of current appointees by using the attached form. Your company has **30 days from the date** of this memorandum to request a list of appointees and/or licensees. However, the list may not be used as the required form for termination of appointments or licenses. Your company must submit the D2-06 termination form for appointees. All termination forms and notice of cancellation forms must be received by February 15, 2009.

If the termination is for any cause listed in NC General Statute 58-33-46, your company is responsible for indicating that reason.

If you have any questions, please contact the Agent Services Division at (919) 807-6800.

PRE-RENEWAL LIST ORDER FORM

PLEASE SEND LIST OF ALL LICENSEES APPOINTED WITH

NAME OF COMPANY

COMPANY NUMBER

PERSON REQUESTING LIST:

MAILING ADDRESS:

EMAIL ADDRESS:

TELEPHONE NUMBER:

(____) _____

SIGNATURE:

Check the media type for your lists:

_____ Paper List (\$175.00 per company list)
Check should be made payable to NCDOI and mailed to address below.

_____ PDF list emailed to you (no charge)

_____ Excel Spreadsheet (no charge)

**North Carolina Department of Insurance
Agent Services Division
1204 Mail Service Center
Raleigh, NC 27699-1204**
You may fax this request to (919) 715-3794 or (919) 715-7352.
You may email your request to ASD@ncdoi.net.