APPENDIX C

STATE OF NEW JERSEY
APPLICATION FOR REGISTRATION AS A PURCHASING GROUP
(All information should be typed)

1. List the exact name of the Purchasing Group.

_____

_____

2. Indicate the form of organization or incorporation and date.

_____

3. The Purchasing Group is domiciled in the State of:

_____

4. List any other names under which the Purchasing Group is or may be doing business in this State or any other State if different from above.

_____

_____

5A. List the complete physical address of the Purchasing Group.

_____

_____

_____

_____

5B. List the mailing address of the Purchasing Group.

_____

_____

_____

_____

6A. List the name, title, address, fax number, and telephone number of the principal officer of the purchasing group who has knowledge of its insurance program,

including membership criteria, coverages, and key personnel of the group's administrator and insurance carrier.

_____

_____

_____

_____

6B. List the name, title, address, fax number, and telephone number of the firm that acts as the administrator of the purchasing group and the name of the principal account executive responsible for the group's insurance program. (If none, answer none.)

_____

_____

_____

_____

7. List the names, addresses and occupation of the principal officers and directors of the Purchasing Group. Attach additional pages if necessary.

Principal Officers	Principal Directors
_____	_____
_____	_____
_____	_____
_____	_____

8. Give a general description of the business or activities engaged in by purchasing group members:

_____

_____

_____

_____

9. List the lines and classification of liability insurance Purchasing Group will purchase:

_____

_____

10. What are the limits of liability including per occurrence, aggregate per participant and group aggregate.

_____

_____

_____

11. Deductible and self-insurance retentions

(a) Which are the responsibility of the individual participant?

_____

_____

(b) Which are the responsibility of the purchasing group and how funded?

_____

_____

12. List the insurance carriers from whom the Purchasing Group will purchase liability insurance described in item (9) above from. Give full name of company, state of domicile and NAIC#:

_____ _____ _____

_____ _____ _____

_____ _____ _____

_____ _____ _____

13. Purchasing groups procuring insurance through companies licensed in New Jersey or registered Risk Retention Groups must use an insurance producer pursuant to **N.J.S.A. 17:22A-1 et seq.** Please identify the producer(s) representing the purchasing group:

Name _____

Address _____

Phone No. _____

Producer License Reference Number: _____

14. Purchasing groups procuring insurance from New Jersey eligible surplus lines companies must place it through a licensed New Jersey insurance producer **with** surplus lines authority pursuant to **N.J.S.A. 17:22-6.40 et seq.** and **17:22A-1.** Please identify the producer(s) representing the purchasing group:

Name _____

Address _____

Phone No. _____

Producer License Reference Number: _____

15. List who will adjust the claims?

Name _____

Address _____

Phone No. _____

16. Has any person transacting business on behalf of this Purchasing Group ever:

(A) been arrested, indicted and convicted of a felony or is a felony charge currently pending against any such person? ____

(B) had denied any application for a professional, vocational or business license? ____

(C) has suspended or revoked any such license? ____

(D) had withdrawn or surrendered any such application or license to avoid potential disciplinary action against licensee? ____

If the answer to any part of this question is yes, attach a supplementary statement explaining in full each such occurrence.

The items described below should be attached to the registration form:

(a) If not previously submitted, registration fee in the amount of $100.00 made payable to the "State of New Jersey - General Treasury."

(b) Completed and signed Service of Process.

(c) A listing of the individual(s) who organized the Purchasing Group and the individuals who are providing administrative services or otherwise influence or control the activities of the group.

(d) A listing of current members.

- The Purchasing Group is composed of members whose business or activities are similar or related with respect to the liability to which members are exposed by virtue of any related, similar, or common business, trade, product, services, premises or operations.

- The Purchasing Group purchases such liability insurance only for its members and only to cover their similar or related liability exposure, as described in item (8) above.

- The policy and promotional material the purchasing group will use has been forwarded along with the registration.

In addition, all required documents as set forth in 15 **USC3901** et seq., **N.J.S.A. 17:47A et seq.** and **N.J.A.C. 11:2:36 et seq.** are being including in this filing.

_____
President or Chief Executive Officer

_____
Secretary

Sworn before me this _____
day of _____,
19___.

_____
Notary Public, State of:
My Commission Expires: