



**Financial Affairs Division
Arizona Department of Insurance**

2910 North 44th Street, Suite 210, Phoenix, Arizona 85018-7269

Phone: (602) 364-3986

Web: <https://insurance.az.gov>

APPLICATION AND ORDER FOR RELEASE OF EXCESS DEPOSIT

A. Application (To be completed by Applicant)

_____ (Name of Company) _____ (NAIC#)

A _____ corporation, is filing this application as required by A.R.S. § 20-588 for release of
(Domicile)

funds deposited with the Arizona State Treasurer, which total _____ in face value.
(1)

I certify, as a duly authorized officer, that such funds are in excess of the required deposit amount of
_____ and that upon release, the remaining amount of funds on deposit, measured as the
(2)

lessor of _____ in face value or _____ in current Account Value*,
(3) (4)

satisfy our deposit requirement.

Signed: _____ Dated: _____

In my capacity as: _____

We have attached a properly completed and signed Release Form E-126CD for each Certificate of Deposit to be released, if applicable.

Please send our copy of this Order to:

B. Order (To be completed by Department of Insurance)

By authority of the Director of Insurance delegated in accordance with A.R.S. § 20-148 and A.R.S. § 20-150, and in accordance with A.R.S. § 20-588, IT IS HEREBY ORDERED approving the application for release of excess deposit set forth above, effective this _____ day of _____, _____.

Assistant Director, Financial Affairs Division

Mailed this _____ day of _____, _____ by _____

*Account Value applies to deposits of marketable securities and is defined in your Custody Agreement as "At any given time, the **sum of the lesser** of the market value, par value or amortized value of **each** Eligible Security held in the Account."