



**Financial Affairs Division**  
**Arizona Department of Insurance**  
100 North 15th Avenue, Suite 102  
Phoenix, AZ 85007-2624

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**LIFE SETTLEMENT PROVIDER**  
**FORM E-LSPI: APPLICATION FOR CERTIFICATE OF AUTHORITY - INSTRUCTIONS**

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Carefully review Arizona Revised Statutes (ARS) §§ 20-3201 through 20-3215. Download forms from the Department of Insurance web page <https://insurance.az.gov/insurers/licensingregistration/life-settlement-provider>. Provide all of the following:

1. A check or money order for the \$1,000 non-refundable application fee, payable to *Arizona Department of Insurance*. ARS §20-3202(B).
2. The completed and signed Form E-LSP1: Life Settlement Provider Application. ARS §20-3202(B).
3. The completed and signed Form E-LSP2: Report of Stockholders/Owners. ARS § 20-3202(C).
4. A complete organizational chart that fully discloses the identity of the applicant's stockholders except for stockholders owning less than ten percent of the shares of an applicant whose shares are publicly traded, partners, officers and employees. ARS §20-3202(C).
5. The completed and signed Form E-LSP3: Report of Officers, Directors, Members, Partners and Designated Employees. ARS § 20-3202(C).
6. For each of the applicant's officers, directors, members, partners, and employee whom the applicant shall designate to act on its behalf under the provider certificate of authority, an originally executed NAIC Form 11: Biographical Affidavit, accessible from [http://www.naic.org/industry\\_ucaa.htm](http://www.naic.org/industry_ucaa.htm). ARS §20-3202(C) and (D).
7. If applicant is a *foreign entity that is approved through the Arizona Corporation Commission*, the Department shall use the Arizona Corporation Commission records to determine the applicant's agent for service of process. ARS §20-3202(H)
8. If the applicant is a *foreign entity that is not approved through the Arizona Corporation Commission*, the applicant must EITHER (ARS §20-3202(H)):
  - a. File the NAIC Form 12: Uniform Consent to Service of Process and Resolution Authorizing Appointment of Attorney, which shall constitute the applicant's irrevocable consent that any action against the applicant may be commenced against the applicant by service of process on the director of insurance,. The form can be located at [http://www.naic.org/industry\\_ucaa.htm](http://www.naic.org/industry_ucaa.htm). **OR,**
  - b. File the Form E-LSP4: Statutory Agent Appointment and Acceptance, which must be completed by both the applicant/provider and the statutory agent.
9. A detailed plan of operation. ARS §20-3202(E)(1)
10. Form E-LSPF: Life Settlement Provider Antifraud Plan Checklist along with the applicant's antifraud plan that meets the requirements of Arizona Revised Statutes § 20-3211, set forth on the checklist. ARS 20-3202(E)(3).
11. A copy of the current bylaws certified by an executive officer of the Applicant. §20-3206(B)

12. A copy of one of the following formation documents. ARS §20-3202(E)(2).
- a. *If the applicant is a corporation or limited liability company*, submit articles of incorporation and all amendments, stamped “filed” by the Arizona Corporation Commission.
  - b. *If the applicant is a partnership*, submit the partnership agreement with all amendments and the certificate of registration stamped as “recorded” in the office of the Arizona Secretary of State, or if organized outside Arizona, stamped as “recorded” with the official government office in which the partnership was recorded.
  - c. *If the applicant is a business trust*, submit a copy of the filed and recorded trust agreement and all amendments.
  - d. *If the applicant is an individual (sole proprietorship)*, provide the information that would otherwise be required by the Arizona Corporation Commission for articles of incorporation, sign the document and have your signature notarized.
13. Evidence that the applicant is in good standing to transact business in the State of Arizona (ARS §20-3202(E)(2)), in the form of the Arizona Corporation Commission “Corporate Inquiry” record and “Corporate Status Inquiry” record. Print these records the Arizona Corporation Commission web site <http://www.azcc.gov/>.
14. A copy of each examination report concerning the applicant that has been filed by regulatory agencies during the past five years. ARS §20-3206(C).

Group all the foregoing Certificate of Authority application materials and send them to the attention of Mr. Cary Cook, Chief Financial Compliance Officer, Financial Affairs Division, at the address shown at the top of the first page.

#### **Arizona Corporation Commission Requirements**

You must also fulfill and comply with requirements prescribed by ARS § 44-1850, et al, that are administered by the Arizona Corporation Commission (“ACC”). For information concerning ACC requirements, visit the ACC’s “Viatical or Life Settlement Investment Contracts” web page at [http://www.azcc.gov/divisions/securities/good\\_to\\_know/viaticals.asp](http://www.azcc.gov/divisions/securities/good_to_know/viaticals.asp)

### **FILING REQUIREMENTS FOR ARIZONA-AUTHORIZED LIFE SETTLEMENT PROVIDERS**

#### **Approvals for Life Settlement Contracts and Disclosure Statements**

A life settlement provider must only use life settlement contracts and disclosure statements within Arizona that have been approved by the Department of Insurance. You must use the NAIC System for Electronic Rate and Form Filings (“SERFF,” accessible at <http://www.serff.org>) to submit life settlement contracts and disclosure statements to our Life & Health Division for approval prior to their use. Details concerning contract and disclosure-statement filing requirements are provided on the Department’s web site <https://insurance.az.gov/producers/life-settlement-broker/life-settlement-broker-license-compliance>. ARS §§ 20-3203, 20-3204 and 20-3211.

#### **Annual Statement Requirement**

By March 1 of each year, each Arizona-authorized life settlement provider must submit Form E-LSPI: Annual Statement.

**NEED HELP?** ► Web site: <https://insurance.az.gov/insurers/licensingregistration/life-settlement-provider>

► Contact Person: Mr. Cary Cook, Chief Financial Compliance Officer  
► Email: [ccook@azinsurance.gov](mailto:ccook@azinsurance.gov) ► Phone: (602) 364-3986