

Trinidad Navarro
Commissioner



Delaware Department of Insurance

CERTIFICATE REQUEST

Pursuant to 18 Del. C. § 701 Fee schedule all fees shall be collected in advance. (18)Copies of documents on file in the Department, (\$.50 per page) minimum - \$5 (19) Certifying and affixing official seals - \$10 (20) Certified copy of insurer certificate of authority or of any license issued under this title - \$10

Please mail Payment and completed Certificate request to:

Delaware Department of Insurance
Attention: BERG Certificates
841 Silver Lake Blvd.
Dover, DE 19904

Any request for expedited processing must be made in writing to BERG@state.de.us

Date of Request:	
Company Name:	
NAIC # or FEI#:	
Contact Person:	
Contact Phone/Email:	
Ship to address:	
<input type="checkbox"/> FedEx or <input type="checkbox"/> UPS Acct#:	

CERTIFICATE INFORMATION (Please list number of certificates requested in box)

#	CERTIFICATE TYPE	#	CERTIFICATE TYPE
	Certificate of Deposit		Certificate of Compliance/Good Standing
	Certified Certificate of Authority or License		UCAA Form 6 Certificate of Compliance
	Certified Statement Annual Quarterly (send stmt)		UCAA Form 7 Certificate of Deposit
	Certificate of Authorization		Certificate of Capital and Surplus
	Certificate of Compliance, Assets & Liabilities		Certificate of Compliance, Capital & Surplus
	Certificate for use in other country China Brazil <input type="checkbox"/> Ecuador Mexico Panama (extra \$10 for notary)		Certified Charter Documents/Orders <input type="checkbox"/> AOI Bylaws Order _____ -ordertype
	Other _____		

DEPARTMENT OF INSURANCE USE ONLY:

Date Request Received: _____	Assigned Invoice Number: _____
Date Request Processed: _____	Date Payment Received: _____
Request Process By: _____	_____
Total Cost: \$ _____	Check Number: _____ Check Amount: _____