Property & Casualty 2100 Stella Court Columbus, OH 43215-1067 (614) 644-2658 (614) 728-1280 www.ohioinsurance.gov

Ohio Department of Insurance Ted Strickland – Governor

Mary Jo Hudson - Director

Surplus Lines Affidavit of Originating Agent



PART 1. STATEMENT OF SURPLUS LINE BROKER OR ORIGINATING AGENT

acknowledges that he/she	e is a duly licensed full multiple line a	gent currently licensed with insurance
companies, other than life, authorized to do busines 3905.30 of the Ohio Revised Code and that after du insurers authorized to do business in Ohio to which	ss in Ohio or he/she is a duly licensed ue diligence, he/she is unable to procu	I surplus line broker pursuant to Section
Property or risk to be insured:		
He/she acknowledges that he/she has complied with 3905.33, and has explained to the insured the mean reasons set forth below from the following authorize customarily write the kind of insurance described a	ning of the affidavits prior to binding zed insurer(s) to which he/she is so lid	coverage and received declinations for the
INSURERS	REASONS	
1		
2		
3		
4		
5		
Signature of Surplus Line Broker or Originating A	gent	
PART 2. AFFIDAVIT OF INSURED AS		5.33 OF THE OHIO REVISED CODE
The named insured		
life insurance) as described above is to be placed w understands that the insurance company is not a me Ohio Revised Code is not applicable to claimants of Ohio tax of five percent of the amount of the premi insured.	with an insurance company not author ember of the Ohio Insurance Guarant or insureds of said insurance company	ized to do business in Ohio. The insured y Association and that Chapter 3955 of the 7. The surplus line broker shall collect the
	Name of Insured	
By:		
	Name and Title	
Sworn to before me and subscribed in my presence	theday of,	<u>.</u>
My commission expires		
	Signature of Notary	