

ADD/REMOVE FICTITIOUS OR DOING BUSINESS AS NAME FORM

Select one:

☐ **Business Entity**

☐ **Individual**

**Submit this completed form to the PA Insurance Department at
ra-inspecialty@mail.pa.gov**

Note: This form is only intended for use by individuals or business entities licensed by the PA Insurance Department. All fictitious names must be registered with the PA Department of State. Registration information can be found at [Business \(pa.gov\)](http://www.business.pa.gov)

LICENSEE INFORMATION

Name as shown on PA insurance license:

PA insurance license number or National Producer Number (NPN):

List below any fictitious/doing business as name(s) TO BE ADDED:

List below any fictitious/doing business as name(s) TO BE REMOVED:

Licensee contact email address and phone number:
