



LIST REQUEST FORM

The list provides the public licensing information for current actively licensed individual producers, business entities licensed as producers and all other individual license types. The list generally includes resident and non-resident individuals and business entities licensed in PA. The list does not include insurance companies, insurance administrators and premium finance firms.

Attach a certified check or money order, payable to The Commonwealth of PA, for \$350.00 to this form. PERSONAL OR BUSINESS CHECKS ARE NOT ACCEPTED.

PLEASE NOTE THAT THE LISTING ONLY INCLUDES PUBLIC INFORMATION AS DISPLAYED ON THE LICENSE AND DOES NOT INCLUDE THE TELEPHONE NUMBERS OR EMAIL ADDRESSES OF THE LICENSEES.

PLEASE PRINT OR TYPE ALL INFORMATION:

REQUESTING PARTY

NAME: _____

TITLE: _____

FIRM NAME: _____

MAILING ADDRESS: (Include street address when using P. O. Box address)

Name of Business: _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

CERTIFICATION

The undersigned hereby certifies that they understand the list only provides public information and is accurate as to the date prepared and may not reflect new licensees or licenses that will be inactive subsequent to the preparation date of the list.

DATE

SIGNATURE