



Government of Puerto Rico
OFFICE OF THE COMMISSIONER OF INSURANCE

Circular Letter No. AC-II-1462-97
May 8, 1997

TO ALL FOREIGN INSURERS ACTING EXCLUSIVELY AS REINSURERS

Subject: Renewal of certificates of authority for fiscal year 1997-98

Sirs:

Section 7.010 of the Insurance Code of Puerto Rico establishes as a condition to continue to be authorized to solicit or transact any kind of insurance in Puerto Rico, that the persons or entities so authorized shall pay, not later than June 30th of each year, a single annual contribution.

Considering the above, and in accordance with Sections 7.010(1)(j) of the aforesaid Code, the annual contribution to be paid by each foreign insurer authorized exclusively as a reinsurer shall be \$2,000.00. To this effect, and in order that said certificate of authority be renewed as of July 1, 1997, it is necessary that the enclosed form be completed and sent to our Office **before May 24, 1997**, together with a check or money order for the aforementioned amount, payable to the Secretary of Treasury, and a pre-addressed small (12" x 9") manila paper envelope.

Strict compliance with the provisions of this circular letter is hereby required.

Sincerely,

A handwritten signature in black ink, appearing to read "Juan Antonio García".

Juan Antonio García
Commissioner of Insurance

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Enclosure

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Gobierno de Puerto Rico
OFICINA DEL COMISIONADO DE SEGUROS

APPLICATION FOR RENEWAL OF CERTIFICATE OF AUTHORITY
AS A REINSURER FOR 1997-98

Date _____

We present the following information in order to obtain the renewal of our certificate of authority for 1997-98:

1. Name of reinsurer _____

2. Current number of certificate of authority _____

3. Corporate Social Security No. (if applicable) _____

4. Postal address _____

5. Home office address _____

6. Phone number _____

7. _____

(Signature of President or Vice President)

(Name)

(Title)

NOTE: Please send this form in duplicate, including a check or money order for the corresponding amount, payable to the Secretary of the Treasury.

Please do not write below this line
