



COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE

IN REPLY, PLEASE
REFER TO:

December 30, 2003

CIRCULAR LETTER NO.: C-E-12-1701-2003

TO ALL FOREIGN INSURERS DOING BUSINESS IN PUERTO RICO

**RE: PREMIUM TAX RETURN FOR THE CALENDAR YEAR ENDING
DECEMBER 31, 2003**

Dear Ladies and Gentlemen:

Pursuant to the provisions of Section 7.021 of the Insurance Code of Puerto Rico, as amended on June 29, 1996, every insurer shall pay to the Secretary of the Treasury of the Commonwealth of Puerto Rico, through our Office, the premium tax corresponding to the insurance business transacted in Puerto Rico or covering risks resident, located, or to be performed in Puerto Rico, wherever transacted.

According to the referred section of law, insurers must pay the corresponding premium tax for calendar year ending December 31, 2003, **on or before March 31, 2004**. For this purpose, we enclose a blank form of the Premium Tax Return, which should be completed and returned to us, with the corresponding payment, by said date. The payment shall be made by check payable to the Secretary of the Treasury of Puerto Rico.

In addition, please be advised that according to the provisions of Section 2.071(3) of the Insurance Code of Puerto Rico, as amended, foreign insurers may credit to the premium tax payable, the amount of the single annual contribution paid for the renewal of their certificate of authority.

Insurers which did not write business for the corresponding report period must indicate so in the Premium Tax Return. Said return must be submitted within the aforesaid deadline.

Strict compliance with the above is hereby required.

Cordially,


Dorelisse Juarbe Jiménez
Chief Deputy Commissioner

Enclosures

2003 PREMIUM TAX RETURN - GENERAL INSTRUCTIONS

1. Only insurers that paid during the taxable year the annual contribution for the renewal of the certificate of authority in the amount of \$6,000 can take credit for same in the computation of its premium tax.
2. No return premiums, or uncollectable premiums or annuity surrenders are allowed as a deduction.
3. No premium tax credit can be taken on account of taxes previously paid in excess of those which are lawful bound to pay. If a refund is due, the insurer should submit satisfactory evidence of the same to this Office in order to evaluate the refund requested.
4. If during tax year the insurer was merged, the insurer shall submit with the current premium tax return, a certified copy by one of the main officials, of the insurer's Puerto Rico state page and Schedule T, prior to the merger.
5. If during tax year the insurer was in process of rehabilitation or liquidation, or for any other reason do not filed its current annual statement with the National Association of Insurance Commissioners (NAIC), the insurer shall submit with the current premium tax return, a certified copy by one of the main officials, of the insurer's Puerto Rico state page and Schedule T.
6. If the insurer do not renewed its certificate of authority to transact business in Puerto Rico, but continue collecting premiums remaining in force as to residents of or risk located in Puerto Rico, then it has to filed on time the premium tax return with the corresponding tax payment.
7. The premium tax return with the check in payment, shall be submitted to the following address:

Office of the Commissioner of Insurance
P. O. Box 8330
San Juan, Puerto Rico 00920-8330

8. If private post meter is used, the premium tax return with payment shall be received on time if physically in this Office by March 31, unless it is sent on March 31 by certified, registered mail or Express Mail.
9. In those cases in which the due date falls on a Saturday, Sunday or holiday, it will be understood that the due date is the next working day.



**Commonwealth of Puerto Rico
OFFICE OF THE COMMISSIONER OF INSURANCE**

**PREMIUM TAX RETURN
FOR THE YEAR ENDED ON DECEMBER 31, 2003**

Insurer's name: _____

Mailing address: _____

NAIC CODE: _____

PROPERTY, CASUALTY, DISABILITY (A & H), SURETY AND TITLE PREMIUMS

1. Premiums per line 34, Col. 1, of state page of current annual statement	\$.xx
2. Total tax for the year (line 1 x .04)		
3. Deduct the annual contribution paid for the renewal of the certificate of authority during 2003		\$6,000.xx
4. Tax due for the year (line 2 less line 3)(If negative, includes "0")	\$.xx

I hereby certify that the information presented in this return is true, correct and complete to the best of my knowledge and belief.

Date

Signature of Authorized Officer

Printed Name

Title

Note : This form must be filed on or before the end of the third month following the aforesaid calendar year.

Include check for tax due payable to the Secretary of Treasury of Puerto Rico.

DO NOT WRITE BELOW THIS LINE

Check No. _____ Amount paid \$ _____ Official Receipt No. and the date _____

(See instructions on reverse)