

## Form 3 **Application for an Insurer's Licence**

Updated May 2013

Office of the Superintendent of Insurance Department of Finance, Government of Nunavut 2nd floor Parnaivik Building, 924 Mivvik Street P.O. Box 2260, Igaluit, Nunavut, XOA 0H0

The Superintendent of Insurance of Nunavut TO: Under the Insurance Act, the undersigned Company makes application to a licence to undertake contracts of insurance in Nunavut. Renewal New 1 Name of Company: Address of head office: 2 Name of Chief Agent in Canada: Phone: Fax: Address of Chief Agent: 3 Name of Chief Agent in Nunavut: Phone: Fax: Address of Chief Agent: 4 Post Office address to which notice or process is to be forwarded by the Superintendent under Section 267 of the Act: 5 The Company is authorized by the *Order to Insure in Canada Risk* dated: to transact in Canada the following classes of insurance: 6 What classes do you apply to be licensed for and authorized to undertake in Nunavut? 7 Type of company: A) Joint stock insurance company

- - B) Mutual insurance company
  - C) Cash-mutual insurance corporation
  - D) Fraternal society

- E) Company duly incorporated to undertake insurance contracts not within classes (a) to (d)
- F) Underwriter or syndicate of underwriters operating on a plan known as Lloyd's
- G) Pension fund associations
- 8 The following documents must accompany the **original** application:
  - A) certified copy of the Company's instrument of incorporation or association and of its constitutions, by-laws and regulations.
  - B) certified copy of its last balance sheet and auditor's report
  - C) if the head office of the insurer is out of the Nunavut Territory an executed copy of a power of attorney from the insurer to the Chief Agent resident of Nunavut
  - D) proof of membership in good standing with compensation corporations, either Property and Casualty Insurance Compensation Corporation (PACICC), or Canadian Life & Health Insurance Compensation Corporation (CompCorp).

memorandum of association, the artic Company, if applicable) been amende	- · · · · · · · · · · · · · · · · · · ·	constitutional rules		No	
If yes, has a duly certified copy of the for the Territory of Nunavut? If not, a	_	ith the Superintend	ent of Insurance Yes	No	
10 Dated at	on	,	20_		
	(Signature of authorized officer of the company)				
		(Title or position in company)			
Statutory Declaration					
<u>l, </u>	<u>,</u> of	·			
in the province, state or territory of:					
the duly appointed  declare that this application is made be I have the means of verifying the corre fully indicated; that no fact or docume solemn declaration conscientiously be under oath and by virtue of the Canac	ectness of this application; that the ent material to be disclosed has been the ent in t	by the authority of facts required to be en concealed or with	indicated are trul held; and I make t	o that y and :his	
DECLARED before me					
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at (plo			(Signature of appl	licant)	
at (plo	ate)	FOR OFFICIAL USE Licente			

9 Answer the following questions only if applying for **renewal** of an existing licence.