

**INSURANCE-FUNDED PREPAID FUNERAL BENEFIT CONTRACT APPLICATION
REQUIRED EXHIBITS CHECKLIST**

- Check or money order in the amount of \$500.00 made payable to: **TEXAS DEPARTMENT OF BANKING**. Please follow directions on the invoice.
- Completed application questionnaire, which is signed by an officer of the applicant. The signature must be notarized.
- Exhibit “A”** – Biographical data for each principal owner, partner, or officer with at least a 25% controlling interest of the business. If this is not applicable, please provide an explanation of the ownership structure, an organizational chart, a list of investors, and biographical data for each officer. Additionally, refer to Supervisory Memorandum 1042 regarding the effects of criminal convictions on licensing.
- Exhibit “B”** – Printer’s proof of the contract with the Seller’s information pre-printed. If you plan to use an electronic contract, please contact the Department for additional requirements.
- Exhibit “C”** – Insurance policies showing the Texas Department of Insurance (TDI) order number or a certification that the policies are exempt, along with a letter from TDI that approves the policies to be used in conjunction with the sale of prepaid funeral benefits contracts.
- Exhibit “D”** – Financial statements, including the most recent interim balance sheet and income statement, along with the most recent annual balance sheet and income statement. In addition, if deemed necessary, the Department reserves the right to request additional financial information to determine if the applicant has the financial capacity to obtain a permit.
- Exhibit “E”** – Last year’s annual statement filed with the Association of Insurance Commissions (NAIC).
- Exhibit “F”** – Proof of Active status with the Texas Comptroller of Public Accounts, if applicable.
- Exhibit “G”** – If applicable, an assumed name certificate that has been filed and executed by the Secretary of State and/or County Clerk. Please refer to the Assumed Name Certificate instructions for more information.
- Exhibit “H”** – Copy of the corporate charter and articles of incorporation.
- Exhibit “I”** – Completed agent designation forms for each agent. At least one agent must be designated who is responsible for the receipt and remittance of premiums collected to the insurance company funding the contracts, accepting payments, and/or handling funds collected under the prepaid funeral program either at the office of the seller or off premises.
- Exhibit “J”** – Authorization for Direct Payment (ACH Debit) form, required per Section 25.23 and 25.24 of the Texas Administrative Code.
- Exhibit “K”** – Insurance Company’s Acknowledgement Statement.
- Proof of Ownership**

INACCURATE OR INCOMPLETE DATA WILL RESULT IN A DELAY IN PROCESSING THE PERMIT APPLICATION. IF THE APPLICATION IS NOT COMPLETED WITHIN 60 DAYS OF THE INITIAL FILING, THE APPLICATION MAY BE CLOSED AND THE FILING FEE SURRENDERED.