



INSURANCE ADJUSTER APPLICATION

FEE	APPLICATION FOR	DATE APPLICATION MADE	PREVIOUS LICENCE NO.
\$75	Licence to Act as an Insurance Adjuster <input type="checkbox"/> New <input type="checkbox"/> Renewal		

For FSCO Use Only	
License No. _____ Date Issued: _____ Expiry Date: _____ Approved By: _____ <input type="checkbox"/> Attachments <input type="checkbox"/> Fee Payment	

PART A: IDENTIFICATION INFORMATION

Personal information requested on this Application is collected under the authority of the *Insurance Act*, R.S.O. 1990, C.I.8, as amended. This information will be used to determine if an applicant is qualified to have a licence issued or renewed. Pursuant to the *Freedom of Information and Protection of Privacy Act*, 1987, the personal information requested will be used to verify the information supplied from any source which may have information pertinent to the information provided. Any questions about this collection may be directed to the Senior Manager, Registration.

PLEASE PRINT OR TYPE ALL INFORMATION

Application on behalf of: (Legal Name in Canada)	_____ (Last Name)	_____ (First Name)	_____ (Middle Initial)
Date of Birth:	_____/_____/_____ (Month) (Day) (Year)		
Mailing Address:			
City	Province	Postal Code	Telephone No. Fax No. E-mail Address
Contact Name:	Position:		
Name of Adjuster or Adjusting Firm now employed by:			

1. This application consists of six parts, Parts A to F. Parts C and F are required to be completed by NEW applicants only.
2. If you have any questions about this application, contact your sponsoring company. For general information, you may contact the Agents and Adjusters Voice Menu Response System at (416) 250-9209 [Toronto] and at (1-800) 263-0541[outside Toronto]. You may also obtain information at our Internet address of www.fSCO.gov.on.ca or by writing the Financial Services Commission of Ontario, Licensing and Enforcement Division, Agents and Adjusters Section, 5160 Yonge Street, Box 85, North York, Ontario, M2N 0L9.
3. Incomplete applications - those that are missing any of the items below - will be returned without processing.
 - Responses to all required parts and questions Required signatures
 - Relevant attachments and supporting documents Required fee - make all cheques and money orders payable to the "THE MINISTER OF FINANCE"

Please be aware, that the deposit of a cheque or money order does not automatically mean that the individual is licensed. Following good management practices, all cheques are deposited on receipt. If an individual does not wish to renew their licence, a refund cheque will be issued upon request.
4. If you are adjusting, using a corporation/partnership, or name other than your personal name, that corporation/partnership or business name must also be licensed with the Financial Services Commission of Ontario. It is an offence to carry on business with a name not licensed by FSCO.
5. Initially, the applicant will be granted a Letter of Authority followed by a Probationary Licence.

Letter of Authority- within 30 months the applicant must complete four courses through the Insurance Institute of Ontario, namely:

 - Course 11- Principles and Practices of Insurance or General Insurance Essentials Course 12- Insurance on Property, Part I
 - Course 14 - Automobile Insurance Course 17- Claims

Probationary Licence - (for those candidates with an AIC or FIIC, no additional courses are required; you can appear before the Qualifications Board) otherwise you have 30 months to complete four more courses through the Insurance Institute of Ontario in addition to the four mentioned above prior to appearing before the Qualifications Board, namely:

 - Course 13- Insurance Against Liability Course 32- Bodily Injury Claims
 - Course 33- Insurance on Property Part II Course 46- Claims II
6. **It is your responsibility to ensure that your license is always in force.**

Providing false, misleading or incomplete information on this application and/or any attachments may be sufficient grounds to reject the application, revoke a licence, or result in prosecution.

PART B: ALL APPLICANTS

If you answer "yes" to any questions in Part B, attach a full explanation in your own words and any relevant official documents. If the application is for licence renewal, only attach supporting documentation not previously submitted.

1. Have you ever been refused registration or a licence under any legislation which required registration or licensing to deal with the public in any capacity (e.g. insurance agent, RIBO broker, securities dealer, motor vehicle dealer) in any province, territory, state, or country; or have you held such a licence and been the subject of a disciplinary proceeding that resulted in a penalty being imposed (e.g. suspension, termination, reprimand, surrender, etc.)? Yes No

2. Have you ever pleaded guilty or been found guilty of an offence under any law of any province, territory, state or country, or are you currently the subject of any charges?..... Yes No

A criminal record search is part of the regular screening process. Your name WILL be searched. Non-disclosure or any misrepresentation of your history of offences will result in significant delays in processing your application and may necessitate a public hearing, as well as possible charges under the *Provincial Offences Act*.
 Offences under federal statutes such as the *Criminal Code*, the *Narcotic Control Act*, the *Food and Drugs Act*, the *Income Tax Act* (Canada), the *Immigration Act* (Canada), the *Competition Act*, the *Copyright Act* are criminal offences and must be disclosed. Where you have pleaded guilty or been found guilty of an offence under the above statutes, or any others, such offences are to be reported even if you were given an absolute or conditional discharge. Where you have received an absolute discharge, disclose it unless at least one year has passed since you were sentenced. In the case of a conditional discharge, disclose it unless at least three years have passed since the date sentence was imposed.
 You do not have to disclose any offence for which a pardon has been granted under the *Criminal Records Act* (Canada) and has not been revoked. (Pardons are not automatically granted merely because of the passage of time. An absolute or conditional discharge is not a pardon.) You do not have to disclose convictions under either the *Young Offenders Act* its predecessor the *Juvenile Delinquents Act*. Offences also include contraventions of any provincial statutes such as the *Highway Traffic Act*, the *Securities Act*, the *Provincial Offences Act*, the *Real Estate and Business Brokers Act*, the *Mortgage Brokers Act*, the *Registered Insurance Brokers Act*, and the *Human Rights Code, 1981*, or their equivalent in other provinces. You do not have to disclose findings of guilty for minor traffic infractions such as speeding or parking violations.

3. Has any partnership or corporation, of which you are or were at the time of such event a partner, officer, director or a controlling shareholder, ever pleaded guilty or been found guilty of an offence under any law of any province, territory, state, or country, or is any such partnership or corporation currently the subject of any charges? Yes No

4. Have you ever been declared bankrupt or made a voluntary assignment in bankruptcy, or are you currently an undischarged bankrupt? Yes No
 (If yes, include trustee's name and address, location of bankruptcy filing, Assignment of Bankruptcy or Receiving Order, Statement of Affairs, and an explanation as to the circumstances of the bankruptcy.)

5. Have you ever been a controlling shareholder, officer, or partner of a corporation or partnership which was declared bankrupt or made a voluntary assignment in bankruptcy, made a proposal under any legislation relating to bankruptcy or insolvency, or is currently not discharged? Yes No
 (If yes, include trustee's name and address, location of bankruptcy filing, Assignment of Bankruptcy or Receiving Order, Statement of Affairs, and an explanation as to the circumstances of the bankruptcy.)

6. Have you ever been successfully sued or has a complaint ever been made against you to a regulatory body in any province, territory, state or country that was or is, based in whole or in part, on fraud, theft, deceit, misrepresentation, forgery, or similar conduct; or based in whole or in part, on professional negligence or misconduct (including claims paid by your errors and omissions insurance carrier or bonding company)?..... Yes No

7. Have you ever had an employment or business relationship terminated for breach of confidentiality, breach of trust, fraud, misappropriation of funds, theft, forgery, sexual harassment, or physical assault?..... Yes No

8. Have you previously held an Insurance Adjuster Licence? Licence No.:_____ Yes No

9. Do you hold an Insurance Agent's Licence? Licence No.:_____ Yes No

10. Do you wish to adjust on behalf of: the company the public

If you are engaged in any business other than that of an insurance adjuster, state the name and nature of such business, the position you occupy and the portion of time that will be devoted to such business.

PART C: NEW APPLICANTS ONLY

EDUCATION

Academic Institution	Years	Academic Standing	Special Courses

EMPLOYMENT FOR THE PAST FIVE YEARS

Employer	Position	Type of Work	Employment Dates		Reasons for Departure
			From	To	

PART D: NOTICE OF APPOINTMENT

To be completed by the licensed insurance adjuster corporation/partnership that is sponsoring the individual.

(Applicant's Name)
is hereby authorized in writing to act as an adjuster for

(Name of insurance adjuster corporation/partnership)

Address: _____

_____ Postal Code: _____

The corporation/partnership has investigated the record of the applicant and is satisfied that:

1. He/she is a person of good character and reputation;
2. He/she is possessed of an educational background that is appropriate to the responsibilities of an adjuster of the sponsoring corporation/partnership, and
3. The applicant is in all respects a suitable person to receive a licence.
4. If and when the adjuster leaves our employ, written notice thereof will be given forthwith to the Superintendent, Financial Services, together with the reason. (Information given is privileged under the *Insurance Act*.)

If and when this adjuster leaves our employ, written notice thereof will be given forthwith to the Superintendent of Financial Services, together with the reason. (Information given to the Superintendent of Financial Services is privileged under The Insurance Act.)

The above applicant will not act as an adjuster until a licence is issued.

(Sponsoring Corporation/Partnership)

_____	_____	_____
Signature - (Authorized Officer)	Title	Date
_____	_____	_____
Signature - (Authorized Officer)	Title	Date

PART E: AFFIDAVIT

I, the undersigned, do hereby state:

1. The statements, declarations and answers to the questions in this application, including attachments, are true, correct and complete.
2. I am familiar with the laws of Ontario relating to the licensing of insurance adjusters and promise to abide by these laws and regulations.
3. I understand that it is against the laws of Ontario to act as an insurance adjuster in Ontario without having obtained a licence to act as an insurance adjuster from the Financial Services Commission of Ontario and to continue to carry on the business of an insurance adjuster after the 30th day of June next following the issue of the licence, or after the suspension or revocation of the licence without securing its renewal or revival.
4. I will hold myself out publicly and carry on business in good faith as an insurance adjuster only in the name in which I am licensed.
5. I understand that any licence issued may be revoked if I have made a misstatement in this application.
6. I am legally entitled to work in Canada.
7. As a licensed insurance adjuster, I will not offer inducement or use coercion or undue influence in order to control, direct or secure insurance business.
8. I will not act as an insurance adjuster until a licence is issued.

(Signature of Applicant) (Sworn if necessary)

Date

PART F: NEW APPLICANTS ONLY

Sworn before me _____
(Print name of Commissioner or Notary Public)

at the _____ in the _____
(City, Town, Village, etc.) (Regional Municipality, County, etc.)

this _____ day of _____, _____

(Signature of Commissioner or Notary Public - a Commissioner for taking Affidavits or Notary Public)