ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
DIVISION OF FINANCIAL INSTITUTIONS, TITLE INSURANCE SECTION

ANNUAL REGISTRATION OF TITLE INSURANCE AGENTS
Pursuant to Sections 14(b) and 16(d) of the Title Insurance Act and Section 8100.1600(a) of the Administrative Code

FOR CALENDAR YEAR 2019

TITLE INSURANCE COMPANY: ____________________________________________

ADDRESS: __________________________________________________________

CITY, STATE, ZIP CODE: ______________________________________________

PHONE NUMBER: ___________________ EMAIL: ________________________

TOTAL NUMBER OF POLICIES ISSUED BY ALL AGENTS, REGISTERED, CANCELLED OR TERMINATED, DURING THE CALENDAR YEAR: ____________

A transaction where a mortgagee’s policy is issued simultaneously with an owner’s policy by the same title insurance company is considered two title policies.

TOTAL DIRECT PREMIUMS ACCRUED FOR ALL POLICIES BY ALL AGENTS IN THE CALENDAR YEAR: $__________________________

AMOUNT OF REGISTRATION FEES ENCLOSED WITH THIS ANNUAL REGISTRATION: $________________

I hereby certify that as Compliance Officer of the company, the following is true and correct to the best of my knowledge and belief:

1. All information maintained by the company for all its agents is current and accurately maintained;
2. Each agent maintains its operation at the address listed for it;
3. If an agent is an individual person, such person has maintained the same name as registered and that the agent was alive, as of December 1 of the calendar year;
4. If the agent is an Illinois attorney, the agent’s license to practice law in Illinois has been in good standing and the agent has not been suspended as of December 1 of the calendar year;
5. If the agent is a corporation, partnership, limited liability company or any other business entity, that the entity has been properly registered with the Illinois Secretary of State, has been authorized to do business here and the entity has not been dissolved;
6. The company has periodically notified its agents that it is required by them to report changes in information to the company so that it can update the Department’s online registration system.

Name of Compliance Officer for the Company (printed) ____________________________

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Signature of the Compliance Officer for the Company

______________________________
Date