

Third Party Administrator Application Checklist

Complete this checklist to assure that your application filing is complete. Incomplete application filings may result in processing delays or may be rejected without further review.

Keep this list for your records. Please **DO NOT** submit this list with your filing.

Use of this form is voluntary. There is no penalty for not completing or submitting it. Its purpose is to list items applicants may be required to file before they may be considered for a certificate of authority to conduct business as a Third Party Administrator in Michigan. Failure to include all required items will result in delay processing or return of your TPA application filing

| | |
|---|------------------------|
| Name of Third Party Administrator applicant | Date Application Filed |
|---|------------------------|

| <u>Filing Item</u> | <u>Filing Item applies to</u> | <u>Filing Item notes</u> |
|--|--|---|
| <input type="checkbox"/> FIS 0861 Third Party Administrator Application for Certificate of Authority | <i>All applicants.</i> | <i>Complete all questions, provide all required attachments.</i> |
| <input type="checkbox"/> FIS 0850 Third Party Administrator Financial Statement | <i>All applicants.</i> | <i>Complete for the most current annual closing period. You may submit a certified auditor's report in lieu of Pages 2-3 of the FIS 0850 form but you must complete and include Page 1.</i> |
| <input type="checkbox"/> FIS 0860 Third Party Administrator Consent to Service | <i>Only applicants incorporated OUTSIDE of Michigan.</i> | <i>Sign form as instructed.</i> |
| <input type="checkbox"/> FIS 0862 Third Party Administrator Affiliation Statement | <i>EACH officer, partner, sole proprietor, stockholder or owner of 10% or more. EACH member of the Board of Directors of the corporation including Board of Trustees, Executive Committee, and any other governing body.</i> | <i>Each person must provide their own signature.</i> |
| <input type="checkbox"/> Articles of Incorporation | <i>All incorporated applicants.</i> | <i>Copies of documents certified by state of domicile.</i> |
| <input type="checkbox"/> Other official filing, i.e. partnership agreement, business license filing, etc. | <i>All unincorporated applicants.</i> | <i>Copies of documents certified by state of domicile.</i> |
| <input type="checkbox"/> Bylaws or operating agreement of the TPA applicant in its own name | <i>All applicants.</i> | |
| <input type="checkbox"/> Chart showing all of TPA applicant's controlling and subsidiary entities | <i>All applicants that are subsidiaries or have subsidiaries.</i> | |
| <input type="checkbox"/> Current organization chart | <i>All applicants.</i> | <i>Show management hierarchy. Include all officers on chart. Label positions with title / function and name of person holding that position.</i> |
| <input type="checkbox"/> Verification of TPA applicant's owners' respective ownership percentages | <i>All applicants.</i> | <i>Provide verification with stock certificates, ownership agreements, etc.</i> |
| <input type="checkbox"/> Copy of sample service contract | <i>All applicants.</i> | <i>See MCL 550.930(1); 550.932.</i> |
| <input type="checkbox"/> FIS 0863 Fee Processing Card for Third Party Administrators | <i>All applicants.</i> | |
| <input type="checkbox"/> Payment in the amount of \$250.00: | <i>All applicants.</i> | <i>Make check or money order payable in US Dollars to "State of Michigan."</i> |
| Application fee \$200.00 | | |
| Certificate fee \$25.00 | | |
| Financial statement review fee \$25.00 | | |

When the filing is complete, submit to:

Department of Insurance and Financial Services
P.O. Box 30165
Lansing, MI 48909-7665



Michigan Department of Insurance and Financial Services

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