FINANCIAL INSTITUTIONS DIVISION
Arizona Department of Insurance and Financial Institutions
100 North 15th Avenue, Suite 261, Phoenix, AZ 85007-2630
Phone: (602) 771-2800 | Web: https://difi.az.gov

Douglas A. Ducey, Governor
Evan G. Daniels, Director

License Surrender Agreement

Licenses may be issued before the completion of the investigation process of your application. This is due to the delay in obtaining certain verification of information provided to the Department in your application package. Please read, sign and notarize this form and return with the application package.

I have read and completely understand the conditions relating to issuance of this license and agree to surrender upon demand the license issued by the Arizona Department of Insurance and Financial Institutions, if any negative or derogatory information of any type is discovered during the investigation of the license application. If asked to surrender the license, I will do so immediately and cease conducting the business activity relating to the license.

Accepted

_____
(Name of Company)

By: _____ *(print)*_____
(Signature of Principal Officer) *(Name of Principal Signer)*

*Date:*_____ *(print)*_____
(Signature of Principal Officer) *(Title of Principal Signer)*

Notarization of Signature

State of _____)___
) ss.
County of _)

*Subscribed and Sworn to before me this*_____day of _____

*year of*_____at _____
(City and State)

_____
Notary Public

My commission expires: _____