

**PLEASE REVIEW THE INFORMATION LISTED BELOW.
FAILURE TO DO SO MAY RESULT IN NON-RENEWAL OF
THE PURCHASING GROUP REGISTRATION**

The completed registration form and the annual renewal fee of \$100.00 **MUST BE RECEIVED** by the Nebraska Department Insurance on or before October 1st. Renewal questions may be directed to GROUP EMAIL.

Enter the address and contact information for the Purchasing Group on the front side of the form in the lines allotted. The general contact's name should be listed as the individual currently responsible for renewal of the registration and/or any inquiries from the Department.

List a current telephone, Fax number and e-mail address for the individual specified as the general contact for the Purchasing Group.

1. If the Purchasing Group has a Federal Identification Number (FEIN) you must list it in item D. If the Purchasing Group does not have an FEN, indicate "None" on this line.
2. Attach a sheet for Item e listing the name, address and title for each officer of the Purchasing Group.
3. For Item O attach a listing generally describing the type of business or activities that the members of the Purchasing Group are engaged in.
4. For Item O list or attach a listing, of all the companies from which the Purchasing Group obtains liability insurance. Any changes in companies utilized by the Purchasing Group must be indicated as a change on the sheet attached or under Item O on the renewal form. If changes are made, you MUST list the NAIC Identification number for any new or additional companies.
5. If a Purchasing Group utilizes a non-admitted company, a designated Nebraska licensed surplus lines agent or agency must be listed in Item S. Renewal forms listing non-admitted companies for which a Nebraska licensed surplus lines agent or agency has not been indicated will not be processed. Listing of surplus lines agents or agencies that do not hold current licensure for surplus lines in Nebraska will also result in rejection of the renewal form.
6. The renewal registration form must be signed (by an Officer of the Purchasing Group or the general contact) and notarized prior to submission to the Nebraska Department of Insurance. Failure to sign the form and have it notarized will result in return of the form to you. Renewal of the Purchasing Group registration occur until the deficiencies have been corrected.
7. Make sure that any information indicated on the renewal form as "Attached" is stapled to the form.

CHECKS SHOULD BE PAYABLE TO THE NEBRASKA DEPARTMENT OF INSURANCE

Mail the completed form and fee to:

Nebraska Department of Insurance
Attn: Lori Bruss
PO Box 82089
Lincoln, NE 68501-2089

Overnight mail to: 1526 K St., Suite 200 Lincoln NE 68508

RENEWAL **ACKNOWLEDGEMENTS** WILL NOT BE MAILED. THE CURRENT STATUS OF THE PURCHASING GROUP REGISTRATION MUST BE CHECKED BY THE CONTACT ON OUR WEBSITE www.doi.ne.gov

If you wish to withdraw or cancel the Purchasing Group registration, please contact Lori Bruss via e-mail at Lori.Bruss@nebraska.gov.

If the Department does not receive BOTH the completed form and fee by October 1st the Purchasing Group registration will expire.

NEBRASKA PURCHASING GROUP REGISTRATION RENEWAL

(Complete Name of Purchasing Group)

(Name of General Contact for the Purchasing Group)

(Address)

(Address)

(City)

(State)

(Zip)

FOR OFFICE USE ONLY

Nebraska Purchasing Group Identification Number:

State of Domicile:

*List below a current telephone, Fax number and e-mail address through which the general contact for the Purchasing Group may be reached:

Telephone #

Fax #

(Area Code)

(Area Code)

E-Mail Address:

1. List Federal Identification Number (FEIN)

2. Please attach a separate sheet containing the name, address and title of each officer of the Purchasing Group.

3. It is required that the Purchasing Group purchases only liability insurance to cover similar or related liability exposure solely for its members. Attach brief general description of the business or activities engaged in by the Purchasing Group members:

CONTINUE COMPLETION OF THE RENEWAL FORM ON THE PAGE

4. List below, or attach a sheet listing the insurance company or companies from which the Purchasing Group purchases liability insurance: (Be sure to indicate if the company is admitted or nonadmitted)

Name of Company	NAIC #	Admitted (In Nebraska) (Circle correct response)
		Yes or No
		Yes or No
		Yes or No
		Yes or No

****If you have circled NO, or indicated on your attached listing for Item #4 that a company is nonadmitted, you MUST complete question #5**

5. If any of the companies listed in question #4 are non-admitted insurers in Nebraska, you MUST either list the name and Nebraska license number of the surplus lines agent or agency below, or attach a sheet listing the name(s) and Nebraska license number(s) of the surplus lines agent(s) or agencies who are responsible for paying taxes and reporting the business of the purchasing Group for the non-admitted insurers:

(Surplus Lines Agent or Agency Name)	Nebr. License #	Expiration Date

It is the responsibility of the purchasing group to notify the Nebraska Department of Insurance of any changes on the initial application of registration within 10 days, pursuant to Neb. Rev.Stat. §444417(1, 3).

The undersigned hereby swears and affirms that the foregoing statements and information are true and correct.

Signature

Title

Sworn before me this _____ day of _____, 20_____

(Notary Public Signature)

State of _____

County of _____ My Commission Expires _____

6/09/2014 (Revised)