

### APPLICATION FOR RENEWAL OF PRENEED CERTIFICATE OF AUTHORITY

FORM ARPCA (REVISED 01/2014)
(APRIL 1, 2014 - MARCH 31, 2015)

THIS APPLICATION MUST BE RECEIVED BY THE ALABAMA DEPARTMENT OF INSURANCE ON OR BEFORE APRIL 1, 2014 OR BE POSTMARKED ON OR BEFORE MARCH 31, 2014.

#### MAIL THIS APPLICATION TO:

ACCOUNTING DIVISION
P. O. BOX 303351
MONTGOMERY, ALABAMA 36130-3351

MONTGOMERY, ALABAMA 36130-3351
NAME OF PRENEED CERTIFICATE HOLDER
ADDRESS OF PRENEED CERTIFICATE HOLDER
CERTIFICATE HOLDER'S TELEPHONE NUMBER AND E-MAIL ADDRESS
PRENEED CERTIFICATE OF AUTHORITY NUMBER
TYPE OF CERTIFICATE HOLDER (Funeral Establishment/Director, Cemetery Authority, Third-Party Seller)
Along with the application, the certificate holder must file a financial statement for the most recent fiscal year. Under Regulation Chapter 482-3-00105, the financial statement may be prepared on either a GAAP basis or the statutory basis of accounting described in the Regulation. Also, the application must be accompanied by the annual renewal fee as shown on the renewal invoice.
Oo any assets shown on the financial statement include any preneed receivables? Yes No If the answer is yes, has the corresponding preneed deferred revenue been shown on the financial statement? Yes No The preneed receivables and preneed deferred revenue related to preneed contracts must be split to show separately those receivables and deferred revenue related to pre-law contracts and those related to post-law contracts.
las there been a change in ownership of the entity holding the preneed certificate of authority? Yes No If the answer is yes, elease describe the change on a separate sheet of paper.
Since filing last year's renewal application, has the name, address, telephone number or email address of the certificate holder shanged? Yes No If the answer is yes, please describe the changes on a separate sheet of paper.
s the preneed business under this Certificate of Authority conducted from more than one location? Yes No If the answer is es, provide the name, address and telephone number of each location on a separate sheet of paper.
las the certificate holder been the subject of any bankruptcy proceeding or had a judgment filed against it since the date of the ast application? Yes No If the answer is yes, attach a statement of the facts together with the case style and number and lame and location of the court(s) in which the proceedings were held or are pending.
For the renewal year, how will the preneed contracts be funded?
(Trust Fund, Life Insurance, Letter of Credit, Surety Bond)
las there been a change in the funding method since the previous application? Yes No If the answer is yes, what was the previous funding method?

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#### **POST-LAW CONTRACTS ONLY**

TRUST FUNDS If contracts are funded with a trust, who is the trustee(s	)?		<u> </u>	
Is this trustee(s) the same trustee(s) as was designated	d in the previous application?	Yes No	_	
If this trustee(s) is different from the trustee(s) designat Alabama Department of Insurance? Yes No		, have new trust do	cuments been filed with the	)
As of Dec. 31, 2013, what is the total number of all p	ost-law preneed contracts out	standing in which t	he funding method	
is trust?	Principal	Interest	Total	
Balance of Trust Fund(s) at Dec. 31, 2013:	\$			
Attach Statement of Activities of Trust Fund Prov				Each
LIFE INSURANCE If contracts are funded with life insurance, who is the in				
Is this insurance company(ies) the same insurance con Yes No	npany(ies) as was designated	l in last year's rene	wal application?	
As of Dec. 31, 2013, what is the total number of all posinsurance? Total Death Benefit at Dec. 31, 20	013: \$		-	
LETTER OF CREDIT  If contracts are guaranteed by a letter(s) of credit, who				
Is the issuer of the letter(s) of credit the same issuer as	was designated in last year's	renewal application	on? Yes No	
If the issuer of the letter(s) of credit is different, has the Insurance? Yes No	new letter(s) of credit been fil	ed with the Alaban	na Department of	
As of Dec. 31, 2013, what is the total number of all posits Letter of Credit?	t-law preneed contracts outsta	anding in which the	funding method	
Amount of Letter(s) of Credit:	\$			
Outstanding Letter(s) of Credit Liability	\$			
SURETY BOND If contracts are guaranteed by a surety bond(s), who is	the issuer of the surety bond(	(s)?		
Is the issuer of the surety bond(s) the same issuer as w	as designated in the previous	s application? Yes	s No	
If the issuer of the surety bond(s) is different, has the no Insurance? Yes No	ew surety bond(s) been filed v	with the Alabama D	epartment of	
As of Dec. 31, 2013, what is the total number of all pos Bond(s)?	t-law preneed contracts outsta	anding in which the	funding method is Surety	
Amount of Surety Bond(s)	\$			
Outstanding Surety Bond Liability	\$			

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## **POST-LAW CONTRACTS ONLY**

		Number	
Preneed Contracts Outstanding on December 31, 2012	Contracts Outstanding Dec. 2012		
Preneed Contracts Written During 2013	( + ) Contracts Entered Into		
Preneed Contracts Cancelled During 2013	( - ) Contracts Cancelled		
Preneed Contracts Fulfilled During 2013	( - ) Contracts Fulfilled		
Preneed Contracts Outstanding on December 31, 2013	( = ) Contracts Outstanding Dec. 2013		
Note: Preneed contracts outstanding at December 31, 2 page 2 of this application.	013 should balance with sum of post-law	preneed contracts listed on	
State the Gross Sales Amount of Preneed Contracts Outsta	nding, as of December 31, 2013 \$		
Citizenship Declaration			
The purpose of this section is to identify sole proprietorships and gen	neral partnerships. <u>Corporations and LLCs do n</u>	ot need to complete this section.)	
s the preneed certificate holder an individual/sole proprietor If the answer is yes, complete and attach the Citizenship De Preneed Certificate of Authority.		is Application for Renewal of	
ls the preneed certificate holder a general partnership made If the answer is yes, each partner must complete and attach Application for Renewal of Preneed Certificate of Authority.		R-1 (11/2011) to this	
Only sole proprietors and partners in a general partnership mu	st complete the Citizenship Declaration Form		
Note: The Citizenship Declaration Form (Form CDPCHBR-1 (11/20	on the Department's website a	at: www.aldoi.gov	
PLEASE SIGN AND DATE BELOW.			
certify that the above information, including the attached finance also certify that I have complied with all of the requirements of Certificate of Authority.			
Signature of Certificate Holder	Date		
Signature of Certificate Holder	Date		