

For Resident applications

<https://www.sircon.com/index.jsp>

The screenshot shows the Sircon website homepage. At the top, there is a navigation bar with the Sircon logo and the text "by Vertafore". The main heading is "Complete. Connected. Compliant." followed by a sub-heading: "Sircon helps you save money, reduce compliance risk, and accelerate time-to-revenue by getting and keeping agents / advisors authorized to sell." Below this, there are six orange buttons arranged in two rows. A blue callout bubble with the word "SELECT" in white capital letters has an arrow pointing to the "Apply for a License" button. The other buttons are "Renew or Reinstatement a License", "Check Application / Renewal Status", "Print a License", "Look up Courses or Transcript", and "View a list of all services". At the bottom of the page, there is a text box with the prompt "Tell us about yourself, and we'll help you find the best Sircon solution for you!" and a label "TELL US WHO YOU ARE:".

Select **"Apply for a License"**

License Applications | Sirco... x

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McAfee

TDI Reports Application TDnet Home Page National Association of Ins...

## License Applications

**i** If you have recently submitted an address change request to your resident state, please allow 5 to 7 business days for processing before submitting a new or updated license application.

[Check the Status of an Existing Application](#) [Renew an Existing License](#)

### NEW INSURANCE LICENSES

Start an application for a **new license** or **add new lines of authority** to an existing license

**New Insurance License**

### NEW ADJUSTER LICENSES

Start an application for a **new adjuster license** or **add new lines of authority** to an existing license

**New Adjuster License**

### OTHER LICENSES

Additional non-resident licenses that do not require an active resident license on the National Producer Database

**Other Licenses**

*You'll be able to select a license type on following screens*

**SELECT**

Select "New Insurance License"

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### License Applications

**i** If you have recently submitted an address change request to your resident state, please allow 5 to 7 business days for processing before submitting a new or updated license application.

[Check the Status of an Existing Application](#) [Renew an Existing License](#)

#### NEW INSURANCE LICENSES

Start an application for a new license or add new lines of authority to an existing license [New Insurance License](#)

Is this a Resident or Non-Resident license?	<input checked="" type="radio"/> Resident	<input type="radio"/> Non-Resident
Are you an individual or a firm?	<input checked="" type="radio"/> Individual	<input type="radio"/> Firm

Cancel [Continue](#)

#### NEW ADJUSTER LICENSES

Start an application for a new adjuster license or add new lines of authority to an existing license [New Adjuster License](#)

#### OTHER LICENSES

Additional non-resident licenses that do not require an active resident license on the National Producer Database [Other Licenses](#)

*You'll be able to select a license type on following screens*

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Select **“Resident”**, select **“Individual”**, and then **“Continue”**.

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## License Applications

**Email Address:**

[Why do you need my email?](#)

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Enter the "Email Address" that you would like the status of this application sent to.

Browser window: <https://uat.sircon.com/products/apply.jsp>

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### Individual Resident License Application

Last Name  \* Required

SSN  \* Required

Confirm SSN  \* Required

Preparer  Applicant  Authorized Submitter \* Required

**A paper copy of each requested license application will be generated at the end of the process regardless of submission method(s).**

#### States Accepting Electronic License Applications

Click on a state name to view the license types available for each submission method.

Attention Georgia Applicants: Beginning January 1, 2012, you are required to submit Citizenship Affidavit Form GID-276-EN with your application. This form is available on the state website at <https://oci.georgia.gov/citizenship-affidavit>.

AL applicants: All individual license applicants must submit proof of US citizenship by going to <https://aldoi.gov/LicenseeCZ/Initial.aspx> before your license is issued.

<input type="radio"/> <a href="#">Alabama</a>	<input type="radio"/> <a href="#">Hawaii</a>	<input type="radio"/> <a href="#">Massachusetts</a>	<input type="radio"/> <a href="#">New Mexico</a>	<input type="radio"/> <a href="#">South Dakota</a>
<input type="radio"/> <a href="#">Alaska</a>	<input type="radio"/> <a href="#">Idaho</a>	<input type="radio"/> <a href="#">Michigan</a>	<input type="radio"/> <a href="#">North Carolina</a>	<input type="radio"/> <a href="#">Tennessee</a>
<input type="radio"/> <a href="#">Arizona</a>	<input type="radio"/> <a href="#">Illinois</a>	<input type="radio"/> <a href="#">Minnesota</a>	<input type="radio"/> <a href="#">North Dakota</a>	<input type="radio"/> <a href="#">Texas</a>
<input type="radio"/> <a href="#">Arkansas</a>	<input type="radio"/> <a href="#">Indiana</a>	<input type="radio"/> <a href="#">Mississippi</a>	<input type="radio"/> <a href="#">Ohio</a>	<input type="radio"/> <a href="#">Utah</a>
<input type="radio"/> <a href="#">California</a>	<input type="radio"/> <a href="#">Iowa</a>	<input type="radio"/> <a href="#">Missouri</a>	<input type="radio"/> <a href="#">Oklahoma</a>	<input type="radio"/> <a href="#">Vermont</a>
<input type="radio"/> <a href="#">Colorado</a>	<input type="radio"/> <a href="#">Kansas</a>	<input type="radio"/> <a href="#">Montana</a>	<input type="radio"/> <a href="#">Oregon</a>	<input type="radio"/> <a href="#">Virginia</a>
<input type="radio"/> <a href="#">Connecticut</a>	<input type="radio"/> <a href="#">Kentucky</a>	<input type="radio"/> <a href="#">Nebraska</a>	<input type="radio"/> <a href="#">Pennsylvania</a>	<input type="radio"/> <a href="#">Washington</a>
<input type="radio"/> <a href="#">Delaware</a>	<input type="radio"/> <a href="#">Louisiana</a>	<input type="radio"/> <a href="#">Nevada</a>	<input type="radio"/> <a href="#">Puerto Rico</a>	<input type="radio"/> <a href="#">West Virginia</a>
<input type="radio"/> <a href="#">District of Columbia</a>	<input type="radio"/> <a href="#">Maine</a>	<input type="radio"/> <a href="#">New Hampshire</a>	<input type="radio"/> <a href="#">Rhode Island</a>	<input type="radio"/> <a href="#">Wisconsin</a>
<input type="radio"/> <a href="#">Georgia</a>	<input type="radio"/> <a href="#">Maryland</a>	<input type="radio"/> <a href="#">New Jersey</a>	<input type="radio"/> <a href="#">South Carolina</a>	<input type="radio"/> <a href="#">Wyoming</a>

#### States Accepting Paper License Applications

There are currently no states accepting paper license applications.

Enter the **Required information**,  
Answer Preparer Question.  
Then Select **Texas**.

Enter the **Required Information**, select the **Preparer**, then select **Texas**.

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### States Accepting Paper License Applications

*There are currently no states accepting paper license applications.*

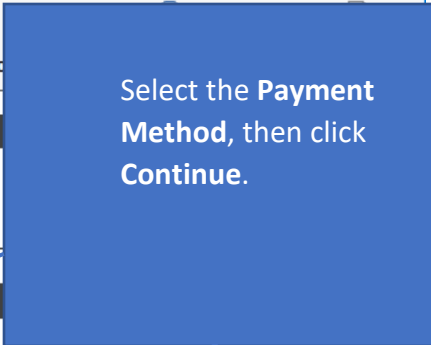
### Payment Method

- Credit Card/Electronic Check Submission  
*\*\* We accept VISA, MASTERCARD, AMERICAN EXPRESS, DISCOVER and electronic checks. \*\**
- I am actively working with a Sircon insurance carrier, agency or partner who is responsible for all or part of the transaction fee. I understand that I am responsible for paying any fees not paid for by the carrier/agency/partner.  
*\*\* We accept VISA, MASTERCARD, AMERICAN EXPRESS, DISCOVER and electronic checks. \*\**
- I am actively working with a Sircon insurance carrier, agency or partner to obtain licensure. I understand that, by checking this box and entering a username/password below, my request will be sent to the carrier/agency/partner who will determine whether to process with the state.

*The information on the following pages may include information provided from the National Insurance Producer Registry's Producer Database and may contain information subject to the Fair Credit Reporting Act, 15 U.S.C. 1681 et seq. A Summary of Consumer Rights is provided [Here](#), and is available for viewing.*

Buttons: Cancel Continue

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Select the **Payment Method**, then click **Continue**.

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### Individual Resident License Application

Not all license types are available in all states. If the license type that you seek is not listed, please contact the state directly and do not apply at this time. State contact information can be found here: [State Information Center](#)

#### License Information

General Lines includes 2 qualifications, LAH and P&C. If you select General Lines, SELECT THE PROPER QUALIFICATION.  
 To apply for resident Adjuster license, attach Certificate of Completion from Adjuster preclicensing course OR Passed Score report from State Exam vendor OR CPCU designation or Associate in Claims (AIC) certification.  
 To apply for an emergency adjuster general lines license, click Temporary General Lines ER Adj.

State Texas

License Type

- Adjuster
- County Mutual Agent
- Escrow Officer
- FM-Alarm Monitoring Technician
- FM-Alarm Planning Supt.
- FM-Ext Apprentice Permit
- FM-Ext Planner's Lic
- FM-Fire Alarm Instructor
- FM-Fire Alarm Technician
- FM-Fire Ext Lic Type A
- FM-Fire Ext Lic Type B
- FM-Fire Ext Lic Type K
- FM-Flame Effects Operator
- FM-Pyrotechnic Operator
- FM-Pyrotechnic Special Eff Op
- FM-Res Alarm Superintendent
- FM-Res Alarm Superintendent-SS
- FM-Res Alarm Technician
- FM-Resp Managing Emp/Dwelling
- FM-Resp Managing Emp/General
- FM-Resp Managing Emp/Inspector
- FM-Resp Managing Emp/Undergma
- General Lines Agent
- Life Agent Individual
- Life Agt Not Exceed \$25,000
- Limited Lines Agent
- Managing General Agent
- Pers Lines Prop and Cas Agent
- Pre-Need Agent
- Public Insurance Adjuster
- Risk Manager
- Surplus Lines Agent
- Temp Gen Lines LAH HMO Agent
- Temp Gen Lines- Emer P&C Agent
- Temp General Lines - P&C Agent
- Temp Life Ins Not Excd \$25,000
- Temp. Pers Lines Prop and Cas
- Temporary County Mutual Agent
- Temporary General Lines ER Adj
- Temporary Life Agent
- Temporary Limited Lines Agent
- Temporary Pre-Need Agent
- Trainee License

Previously licensed ?  Yes  No

Cancel Back Continue

Select License type,  
 Answer  
 Previously  
 Licensed  
 Question.  
 Then Select **Continue**

## Individual Resident License Application

### Individual Information

*Please note that the e-mail address entered on this page is the address to which the license application confirmation e-mail and PDF file will be sent. This is only applicable to individuals who do not have an active subscription to SIRCON. List any other assumed, fictitious, alias, maiden or trade names which you have used in the past or are currently doing business as or intend to do business as. Disclosure of Social security Number is Required by the Texas Family Code §231.302.*

**Social Security Number**  \* Required

**National Producer Number**

**First Name**  \* Required

**Middle Name**

**Last Name**  \* Required

**Suffix (Jr, Sr, etc.)**

**Birth Date** MM-DD-YYYY  \* Required (mm-dd-yyyy)

**Gender**  \* Required

**Citizen Country Code**  \* Required

**Business Email Address**  \* Required

**Applicant Email Address**  \* Required

**Business Web Address**

**FINRA CRD Identifier**

Verify the information provided, complete any additional required information





### Individual Alias Information

The information in this section is optional.

If you elect to provide this information, please enter all required fields.

List any other assumed, fictitious, alias, maiden or trade names which you have used in the past. List any trade names under which you are currently doing business or intend to do business. (May be subject to state approval)

Type  \* Required  
First Name  \* Required  
Middle Name   
Last Name  \* Required  
Suffix Name

Type  \* Required  
First Name  \* Required  
Middle Name   
Last Name  \* Required  
Suffix Name

Type  \* Required  
First Name  \* Required  
Middle Name   
Last Name  \* Required  
Suffix Name

Type  \* Required  
First Name  \* Required  
Middle Name   
Last Name  \* Required  
Suffix Name

[Add More Individual Alias Information](#)

This section is Optional and should not be completed.



Browser address bar: <https://uat.sircon.com/product>

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Menu: File Edit View Favorites Tools Help

Buttons: Convert, Sele

### Individual Residence Address

*The Residential address must be the physical home address where the applicant resides. DO NOT enter a P.O. Box address. Do not enter punctuation in any address field.*

Line One  \* Required

Line Two

Line Three

City  \* Required

State  \* Required

Postal Code  \* Required

Country  \* Required

### Individual Business Address

*The Business address must be the physical business address at which business records of insurance transactions are maintained. DO NOT enter a P.O. Box address. Do not enter punctuation in any address field.*

Line One  \* Required

Line Two

Line Three

City  \* Required

State

Postal Code  \* Required

Country  \* Required

### Individual Mailing Address

*This must be your official permanent mailing address and is the address of record to which official correspondence, forms, notices and other information will be sent. Do not enter punctuation in any address field.*

Line One  \* Required

Line Two

Line Three

City  \* Required

State

Postal Code  \* Required

Country  \* Required

### Residence Phone Information

Phone Number  \* Required

### Business Phone Information

*Daytime Phone Number*

Phone Number  \* Required

Extension

### Business Fax Information

*The information in this section is optional. If you elect to provide this information, please enter all required fields.*

Fax Number

Buttons: Cancel Back Continue

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Complete the address, and phone number information, then select **Continue**

### Individual Resident License Application

#### Employment History Information

Please enter information into the sections below (at least one is required).  
Account for all time for the past five years. Give all employment experience starting with your current employer working back five years. Include full and part-time work, self-employment, military service, unemployment and full-time education.  
If providing current employment, please enter current month and year as the end date.

Current Employment

Beginning Date  \* Required (mm-YYYY)

Ending Date  \* Required (mm-YYYY)

Employer Name  \* Required

City  \* Required

State

Province

Country  \* Required

Position Description  \* Required

Current Employment

Beginning Date  \* Required (mm-YYYY)

Ending Date  \* Required (mm-YYYY)

Employer Name  \* Required

City  \* Required

State

Province

Country  \* Required

Position Description  \* Required

Current Employment

Beginning Date  \* Required (mm-YYYY)

Ending Date  \* Required (mm-YYYY)

Employer Name  \* Required

City  \* Required

State

Province

Country  \* Required

Position Description  \* Required

Current Employment

Beginning Date  \* Required (mm-YYYY)

Ending Date  \* Required (mm-YYYY)

Employer Name  \* Required

City  \* Required

State

Province

Country  \* Required

Position Description  \* Required

Add More Employment History Information

Enter at least 5 years worth of Employment History.



https://uat.sircon.com/products/apply.jsp

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### Affiliation Information

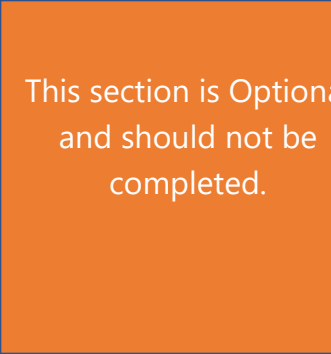
*The information in this section is optional.  
If you elect to provide this information, please enter all required fields.*

**Agency Name**  \* Required  
**Agency EIN**  \* Required  
**National Producer Number**

**Agency Name**  \* Required  
**Agency EIN**  \* Required  
**National Producer Number**

**Agency Name**  \* Required  
**Agency EIN**  \* Required  
**National Producer Number**

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Do not Complete this Section, it is optional anyway. Then select "Continue".

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### Individual Resident License Application

## Texas Resident Risk Manager Background Questions

*All questions are required unless otherwise specified*

Please answer the following Texas Resident Risk Manager Background Questions

#### Question 1

**Fingerprints will be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation in accordance with applicable statutes.**

Are you claiming exemption from the requirement to submit a fingerprint receipt based on being an individual applicant with an active TX license and have already submitted fingerprints to TDI with another license application?

No  
 Yes

#### Question 1A

If Yes, please enter the following information  
TDI License Number:

**Question 1B**

Identigo Receipt TCN # or UE ID:

**Question 1C**

City Location:

**Question 1D**

Date listed on fingerprint receipt (must be in mm-dd-yyyy format):

**Question 1E**

**Please attach the required document once you submit the application.**  
Fingerprint receipt will be attached to this application.

No  
 Yes

Answer all questions **carefully.**

Attach any required documentation to this application after you submit the application.

Complete all **Texas State Specific Questions.**

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### Question 2

Do you qualify for Military processing?  
**If yes, attach DD214 supporting documentation.**

No  
 Yes

### Question 2A

Select how you qualify?

A. Military service member: A person who is currently serving in (1) the armed forces of the United States, (2) a reserve component of the armed forces, including the National Guard, or (3) a state military service of any state.

B. Military spouse: A person who is married to a military service member who is currently on active duty.

C. Military veteran: A person who has served in: (1) the Army, Navy, Air Force, Marine Corps, or Coast Guard of the United States, or (2) in an auxiliary service of one of those branches of the armed services.

### Question 3

Are you indebted to any policyholder, insurance or reinsurance company, insurance agency, general agent, managing general agency, premium finance company or court appointed liquidator for premiums collected or commissions retained, or have any claims or judgments been filed against you for retaining premiums or commissions?  
**If answered "Yes", a license will not be issued until full details of the indebtedness are provided.**

No  
 Yes

### Question 4

Do you currently hold any adjuster, public insurance adjuster or insurance agent license in any state other than Texas or have you held any adjuster, public insurance adjuster or insurance agent license in any state other than Texas within the last five years?

No  
 Yes

Cancel Back Continue

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Answer all questions carefully.

Attach any required documentation to this application after you submit the application. Then Select **Continue**.

Answer all the **Universal Background** questions.

The screenshot shows a web browser window with the URL <https://uat.sircon.com/products/apply.jsp>. The page title is "License Applications | Sirco...". The browser's address bar and menu bar are visible. The main content area has a dark header "Individual Resident License Application" and a sub-header "Uniform Background Questions - Individual". Below the sub-header, it says "All questions are required unless otherwise specified". A bold instruction reads "Please answer the following Uniform Background Questions - Individual". A note follows: "The Applicant must read the following very carefully and answer every question. All written statements submitted by the Applicant must include an original signature." The first question is titled "Question 1" and includes a "NOTE" about the definition of "Convicted". It asks if the applicant has been convicted of a misdemeanor, had a judgment withheld or deferred, or are currently charged with committing a misdemeanor. It lists exclusions for traffic citations, DUI, DWI, reckless driving, and juvenile adjudications. At the bottom, there are radio buttons for "No" and "Yes".

**Individual Resident License Application**

**Uniform Background Questions - Individual**

*All questions are required unless otherwise specified*

**Please answer the following Uniform Background Questions - Individual**

*The Applicant must read the following very carefully and answer every question. All written statements submitted by the Applicant must include an original signature.*

**Question 1**

**NOTE:** For Questions 1a, 1b and 1c, "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere or no contest, or having been given probation, a suspended sentence, or a fine.

If you answer yes to any of these questions, you must attach to this application:

- a) a written statement explaining the circumstances of each incident,
- b) a copy of the charging document,
- c) a copy of the official document, which demonstrates the resolution of the charges or any final judgment.

**Question 1A**

Have you ever been convicted of a misdemeanor, had a judgment withheld or deferred, or are you currently charged with committing a misdemeanor?

You may exclude the following misdemeanor convictions or pending misdemeanor charges: traffic citations, driving under the influence (DUI), driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license.

You may also exclude juvenile adjudications (offenses where you were adjudicated delinquent in a juvenile court)

No

Yes

Answer all questions carefully.

Attach any required documentation to this application after you submit the application.

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### Question 1B

Have you ever been convicted of a felony, had a judgment withheld or deferred, or are you currently charged with committing a felony?

You may exclude juvenile adjudications (offenses where you were adjudicated delinquent in a juvenile court)

No  
 Yes

---

### Question 1B1

If you have a felony conviction involving dishonesty or breach of trust, have you applied for written consent to engage in the business of insurance in your home state as required by 18 USC 1033?

No  
 Yes  
 Not Applicable

---

### Question 1B2

If so, was consent granted? (Attach copy of 1033 consent approved by home state.)

No  
 Yes  
 Not Applicable

---

### Question 1C

Have you ever been convicted of a military offense, had a judgment withheld or deferred, or are you currently charged with committing a military offense?

No  
 Yes

---

Answer all questions  
**carefully.**

Attach any required  
documentation to this  
application after you  
submit the application.



Browser window showing a license application page. The URL is <https://uat.sircon.com/products/apply.jsp>. The page title is "License Applications | Sirco...". The browser menu includes File, Edit, View, Favorites, Tools, and Help. The address bar shows "Search...". The page content includes:

### Question 2

Have you ever been named or involved as a party in an administrative proceeding, including FINRA sanction or arbitration proceeding regarding any professional or occupational license or registration?

"Involved" means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation, sanctioned or surrendering a license to resolve an administrative action.

"Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license, or registration. "Involved" also means having a license, or registration application denied or the act of withdrawing an application to avoid a denial. INCLUDE any business so named because of your actions in your capacity as an owner, partner, officer or director, or member or manager of a Limited Liability Company.

You may EXCLUDE terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

If you answer yes, you must attach to this application:

- a written statement identifying the type of license and explaining the circumstances of each incident,
- a copy of the Notice of Hearing or other document that states the charges and allegations, and
- a copy of the official document, which demonstrates the resolution of the charges or any final judgment.

No  
 Yes

### Question 3

Has any demand been made or judgment rendered against you or any business in which you are or were an owner, partner, officer or director, or member or manager of a limited liability company, for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding? Do not include personal bankruptcies, unless they involve funds held on behalf of others.

If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment, and/or type and location of bankruptcy.

No  
 Yes

Answer all questions **carefully.**  
Attach any required documentation to this application after you submit the application.

#### Question 4

Have you been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement?

If you answer yes, identify the jurisdiction(s):

- No
- Yes

Comment

#### Question 5

Are you currently a party to, or have you ever been found liable in, any lawsuit, arbitrations or mediation proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty?

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident,
- b) a copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, or mediation proceedings, and
- c) a copy of the official documents, which demonstrates the resolution of the charges or any final judgment.

- No
- Yes

#### Question 6

Have you or any business in which you are or were an owner, partner, officer or director, or member or manager of a limited liability company, ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct?

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and
- b) copies of all relevant documents.

- No
- Yes

Answer all questions **carefully.**

Attach any required documentation to this application after you submit the application.

Browser window showing a license application form on <https://uat.sircon.com/products/apply.jsp>. The page contains three questions (7, 7A, and 7C) with radio button options. A blue callout box on the right provides instructions: "Answer all questions carefully. Attach any required documentation to this application after you submit the application." A blue box labeled "Select Continue" has an arrow pointing to the "Continue" button at the bottom of the form.

**Question 7**

Do you have a child support obligation in arrearage?

(If you answered yes, provide documentation showing proof of current payments or an approved repayment plan from the appropriate state child support agency.)

No  
 Yes

**Question 7A**

By how many months are you in arrearage?

**Question 7B**

Are you currently subject to and in compliance with any repayment agreement?

No  
 Yes

**Question 7C**

Are you the subject of a child support related subpoena/warrant?

No  
 Yes

Buttons: Cancel, Back, Continue

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Answer all questions carefully.  
Attach any required documentation to this application after you submit the application.

Select Continue

Browser window showing the URL: <https://uat.sircon.com/products/apply.jsp>

## Individual Resident License Application

### Attestation Information for State of Texas: Risk Manager

Verify the background questions were answered correctly before you submit the application.

I hereby certify that, under penalty of perjury, all the information submitted in this application and attachments is true and complete. I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license revocation or denial of the license and may subject me to civil or criminal penalties.

Unless provided otherwise by law or regulation of the jurisdiction, I hereby designate the Commissioner, Director, Superintendent of Insurance, or other appropriate party in each jurisdiction for which this application is made to be my agent for service of process regarding all insurance matters in the respective jurisdiction and agree that service upon the Commissioner, Director, Superintendent of Insurance, or other appropriate party of that jurisdiction is of the same legal force and validity as personal service upon myself.

I further certify that I grant permission to the Commissioner, Director, Superintendent of Insurance, or other appropriate party in each jurisdiction for which this application is made to verify information with any federal, state or local government agency, current or former employer, or insurance company.

I authorize the jurisdictions to which this application is made to give any information concerning me, as permitted by law, to any federal, state or municipal agency, or any other organization and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.

I acknowledge that I understand and will comply with the insurance laws and regulations of the jurisdictions to which I am applying for licensure.

I hereby certify that upon request I will furnish the jurisdictions to which I am applying certified copies of any documents that will be attached, as a part of this application process or any items requested by the jurisdiction.

I will provide **one** of the following:

An active TDI license number in answer to Question 1  
OR  
my fingerprint receipt.

I Agree\* *Required*

Buttons: Cancel, Back, Continue

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Read **Attestation** carefully,  
Select Agree

Read the Attestation carefully, then select "**I Agree**", then select "**Continue**".

https://uat.sircon.com/ComplianceExpress/LicenseAppli

### Individual Resident License Application

#### License Application Summary

State to Apply Texas  
 Last Name [REDACTED]  
[Review License Application](#)

#### Electronic Applications

Dest. State	License Type	Qualification Type	Total State Fee
Texas	Risk Manager		\$50.00
<b>State Fee Total</b>			\$50.00
<b>Sircon Service Fee</b>			\$8.50

#### Fee Summary

Electronic Applications State Fee Total	\$50.00
Sircon Service Fee Total	\$8.50
Processing Fee Total	\$2.63
<b>Total</b>	<b>\$61.13</b>

*Note: The above amount will not be charged to your credit card until you complete the payment process. Click the Submit button to proceed with the payment process.*

I understand that all license application fees are non-refundable.  
[Click here to view additional state requirements](#)

I would like to receive email notifications concerning state insurance deadlines, renewal notices, new electronic services and related issues.

Please send email notifications to:

Use my information to create a Sircon account so I can track and manage my license credentials and continuing education (CE) requirements for free. [What's this?](#)

Sircon account email   
 Confirm your email to sign up

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Review complete application. Also, Review **ASR** document carefully **before** submitting the application.

Must be checked

Supply / Verify email address

Supply / Verify Sircon account

Select Submit

The applicant must check the box next to "I understand that all license renewal fees are non-refundable."

## Individual Resident License Application

### License Application Additional State Requirements

#### Texas - Risk Manager

- **Method of Submitting:** When your license application has been submitted electronically to the Texas Department of Insurance, print a copy of the license application form to retain for your own records; DO NOT send it to the state.
- **If applying for a Resident license, or not qualifying via reciprocity, verify that you have provided one of the following:**
  1. Active TDI license number OR
  2. Fingerprint receipt
- All required attachments including documentation required in response to a "Yes" answer on a background question or other requirements should be submitted to the state as follows:
  - (1) On the License Application Confirmation page or the License Application Activity Inquiry, the applicant will be offered the Attach Supporting Documents button (paperclip icon) in the Action column.
  - (2) Click the button to open the Attach Supporting Documents page.
  - (3) There you can browse for the electronic document on your computer system, provide a description to give context for the reviewer, and
  - (4) upload the document(s) to the license application.
 If you do not have scan capability, fax all required documents to the number listed below or mail to:
- **Texas Department of Insurance**  
 Agents Licensing Division  
 PO Box 12030,  
 Austin, TX 78711-2030  
 Phone: (512) 676-6500  
 Fax: (512) 490-1052
- **Fingerprinting**  
 The fingerprint requirement is authorized in Texas Insurance Code 801.056 and amended 28 TAC 1.501 and 1.503-1.509. The complete text of the rule may be accessed at [www.tdi.texas.gov/rules/2006/1003e-059.html](http://www.tdi.texas.gov/rules/2006/1003e-059.html). The Texas Department of Insurance strongly encourages all resident applicants to utilize electronic fingerprinting through approved vendors as authorized under the rule. Electronic fingerprinting is fast and accurate, and in many cases will avoid potential delays in the processing of your submission.
- **Electronic Fingerprinting**  
 View the Electronic Fingerprinting instructions at the following location:  
<https://www.tdi.texas.gov/agent/fingerprint-instructions.html>.
- (Fingerprints provided for an application will be used to check criminal history records of the Texas Department of Public Safety (DPS) and the Federal Bureau of Investigation (FBI), in accordance with applicable statutes).
- Verify you have entered the correct SSN and Date of Birth information on the application.
- All applicants will undergo a criminal history background check before receiving a license from the Texas Department of Insurance.
- If you are not a citizen of the United States, you must provide proof of eligibility to work in the U.S. by submitting a copy of your Employment Authorization Card.
- Verify the background questions were answered correctly before you submit the application.
- Verify the License type/Qualification listed on the payment page is the desired License Type/Qualification.
- **To ensure proper processing of application, please note the following:**
  - Enter all data for the application in CAPS only.
  - Do not enter a P.O. Box address in the Business address field.
  - Do not enter punctuation in any address field.
- **To check on the status of your application, please use the following steps:**
  - In your web browser, go to [www.sircon.com/Texas](http://www.sircon.com/Texas).
  - Click on the "Check License Application Status" link in the left hand column
  - Enter your confirmation ID number, SSN and Producer Type
  - Click the Submit button
- Once your license application is approved, it may be printed at [www.sircon.com/Texas](http://www.sircon.com/Texas). There will be no fee for printing your license for 30 days from the date the license application was approved.
- Once 30 days have passed since your license was approved, a \$5.00 processing fee will be charged to print your license.
- If you obtain a Sircon for Individuals account (available at no cost), there is no fee for printing your license from your Sircon for Individuals account at any time. Refer to [www.sircon.com/Texas](http://www.sircon.com/Texas) for information on Sircon for Individuals accounts.

Review ASR  
document  
carefully.

Select close once  
read.

Close This Window



This is a **sample** of what you will see after you submit your application. This screen will provide you the opportunity to attach required documentation with your application submission. Be sure to provide a **Document Description** to each attached file.

## Attach Supporting Documents

**License Applications**

*You may attach files to the license applications below.*

State	License Number	License Type	Date Submitted	Status
TX			05-11-2020	Submitted

**Attachments**

- Use the fields below to locate and describe documents to attach to your license application requests.
- Clearly identify why you are attaching the document in the Document Description field.
- Note that the attachments you provide will only be sent to the specific states listed above.
- Please see the FAQs below for more information.

Select a Document  No file chosen

Document Description

**Frequently Asked Questions**

- How do I know what documents to attach for each state?
- What if I don't have the documentation right now, or I don't have an electronic copy?
- Why can't I attach documents to other license applications?
- Are my documents secure when I attach them?
- What if I do not see my license listed above?

Choose a file to **attach** to your submission, attach the file, provide a Document Description, then click submit

Be sure to add a Document Description to each attached file.