

BIOGRAPHICAL AFFIDAVIT - PREMIUM FINANCE APPLICANT (FORM PF4)

ull N	ull Name and Address of Premium Finance Applicant/Licensee				
nyse	nnection with the above-named company, I herewith make representations and supply information about If as hereinafter set forth. (Attach addendum or separate sheet if space hereon is insufficient to answer any cions fully.) If ANSWER IS "NO" OR "NONE", SO STATE.				
•	Affiant's Full Name (Initials Not Acceptable):				
	a. Have you ever had your name changed? If yes, give reason for the change:				
	b. Other names used at any time:				
•	Affiant's Social Security Number:				
	Date and Place of Birth:				
	Affiant's Business Address:Business Telephone:				
	List your residences for the last ten (10) years starting with your current address, giving: <u>DATES</u> <u>ADDRESS</u> <u>CITY, STATE, ZIP CODE</u>				
•	Education: Dates, Names, Locations and Degrees. College				
	Graduate Studies				
	Others				
-	List Membership in Professional Societies and Associations:				
•	Present or Proposed Position with the Applicant Company:				
0.	List complete employment record (up to and including present jobs, positions, directorates or officerships) for the past twenty (20) years: DATES EMPLOYER AND ADDRESS TITLE				

11.	Present employer may be contacted: Yes \square No \square Former employers may be contacted: Yes \square No \square				
12.	Have you ever been discharged for cause or requested to resign from any position?				
13.	Have you ever been an owner, partner, officer, director, stockholder, or employee of any pawnshop, loan, discount or finance business or of the parent, subsidiary or affiliate of such business: A. Other than listed within this application? B. Or any other organization which was refused a license, withdrew application to avoid refusal, or had its license or permit suspended, revoked by any authority? C. Or any other organization which was the subject of bankruptcy, insolvency or receivership?				
14.	Have you ever been ARRESTED, CHARGED, INDICTED or CONVICTED regarding a violation of the law, either felony or misdemeanor other than a traffic violation?				
15.	Have you ever been a defendant in a civil court action or administrative proceeding other than divorce, condemnation or personal injury?				
16.	Are there any unpaid judgements outstanding against you?				
17.	Have you ever had an application for any type of professional or occupational license disapproved or any such license suspended, cancelled or revoked?				
18.	Have you ever made a compromise with creditors, taken bankruptcy or pleaded the Statute of Limitations?				
19.	Have you ever held a license to sell insurance? real estate? securities?				
20.	If married, has your spouse ever been an owner, partner, officer, director, stockholder or employee of any pawnshop, loan, discount or finance business or the parent, subsidiary or affiliate of such business or would your spouse answer "Yes" to Questions 14 through 18 above?				
21.	Are you now or have you ever been held liable for fraud in any civil suit or found guilty of fraud in any criminal or administrative proceeding?				
22.	If you were ever discharged from the U.S. Armed Forces, was said discharge other than Honorable?				
23.	Have you ever been named in any order, judgement or decree of any court or any governmental agency of administrator, temporarily or permanently restraining or enjoining you from engaging in or continuing any conduct, practice or employment (other than in a divorce action)?				
24.	a. Have you ever been in a position which required a fidelity bond? If any claims were made on the bond, give details:				
	b. Have you ever been denied an individual or position schedule fidelity bond, or had a bond cancelled or revoked?				
	If yes, give details:				

IF ANY QUESTION ABOVE HAS BEEN ANSWERED OTHER THAN "NO", ATTACH A FULL STATEMENT OF THE FACTS WHICH REQUIRED THIS ANSWER.

Dated and signed this day of	at	
I hereby certify under perjury that I am acting o correct to the best of my knowledge and belief.		at the foregoing statements are true and
State of		(Signature of Applicant)
State of County of		
Personally appeared before me the above name to me, who, being duly sworn, deposes and says answers contained therein are true and correct	that he executed the abo	ove instrument and that the statements and
Subscribed and sworn to before me this	day of	20
Seal		
		(Notary Public)
	My com	mission expires

Your rights: You can request information we have about you by emailing OpenRecords@tdi.texas.gov or writing to: Public Information Coordinator, Texas Department of Insurance, PO Box 12030 (mail code GC-ORO) Austin, Texas 78711-2030. You also have the right to ask that we fix information we have about you that is wrong. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be fixed, and (3) the reason or proof showing why the information is wrong. Send this by email to RecordCorrections@tdi.texas.gov or by mail to: Record Correction Request, Texas Department of Insurance, PO Box 12030 (mail code CO-AAL-CC), Austin, Texas 78711-2030.