

Certificate of Accredited Assuming Insurer
Form AR-1

► **Certification**

I, _____, _____
(Name of officer) (Title of officer)

of _____,
(Name of accredited assuming insurer)

under a reinsurance agreement with one or more insurers domiciled in Texas, hereby certify that

(Name of accredited assuming insurer) :

1. Submits to the jurisdiction of any court of competent jurisdiction in the State of Texas for the adjudication of any issues arising out of the reinsurance agreement, agrees to comply with all requirements necessary to give such court jurisdiction, and will abide by the final decision of such court or any appellate court in the event of an appeal. Nothing in this paragraph constitutes or should be understood to constitute a waiver of the accredited assuming insurer's rights to commence an action in any court of competent jurisdiction in the United States, to remove an action to a United States District Court, or to seek a transfer of a case to another court as permitted by the laws of the United States or of any state in the United States. This paragraph is not intended to conflict with or override the obligation of the parties to the reinsurance agreement to arbitrate their disputes if such an obligation is created in the agreement.
2. Designates the Texas Commissioner of Insurance as its lawful attorney upon whom may be served any lawful process in any action, suit or proceeding arising out of the reinsurance agreement instituted by or on behalf of the ceding insurer.
3. Submits to the authority of the Texas Commissioner of Insurance to examine its books and records and agrees to bear the expense of any such examination.
4. Submits with this form a current list of insurers domiciled in Texas reinsured by the accredited assuming insurer and undertakes to submit additions to or deletions from the list to the Texas Commissioner of Insurance at least once per calendar quarter.

▶ **Signature**

Dated: _____

(Name of accredited assuming insurer)

By: _____

(Name of officer)

(Title of officer)

▶ **Instructions**

Return to CLRFilings@tdi.texas.gov.

▶ **Questions?**

Email CompanyLicense@tdi.texas.gov or call Company Licensing and Registration at 512-676-6365.