

## Title Insurance Agent or Direct Operation Appointment

**Use this form to:**

- Register counties of operation for a new appointment or direct operation.
- Add counties of operation to an existing appointment or direct operation.
- Remove counties of operation from an existing appointment or direct operation.
- End a title insurance agent or direct operation appointment.

**You might have to pay a fee:** If this is not for (1) a title insurance agent's first appointment, or (2) a direct operation's original registration with an Application for title insurance agent or direct operation license (Form FINT143), you must send \$16 to the Texas Department of Insurance. TDI does not give refunds or allow fee transfers.

► **Answer the following questions:**

**Title insurance company**

Company name \_\_\_\_\_

Company TDI license number \_\_\_\_\_

**Title insurance agent or direct operation** (if applicable)

Name \_\_\_\_\_

TDI license number (if they have one) \_\_\_\_\_

Firm ID number (if they have one) \_\_\_\_\_

**The contact for this form**

Contact name \_\_\_\_\_

Contact email \_\_\_\_\_

Contact phone number \_\_\_\_\_

► **Fill out this section to register counties of operation for a new appointment or direct operation**

- **If this is for a new appointment:** List all counties where the title insurance agent or direct operation may act for the title insurance company.
- **If this is for a new direct operation:** List all counties where the direct operation will write, sign, or deliver title insurance for the title insurance company.

**List counties of operation you want to register for the new appointment or direct operation.** If more space is needed, attach another page.

_____	_____	_____
_____	_____	_____

► **Fill out this section to add counties of operation to an existing appointment or direct operation**

- **If this is for an existing appointment:** List new counties where the title insurance agent or direct operation can act for the title insurance company.
- **If this is for an existing direct operation:** List new counties where the direct operation will write, sign, or deliver title insurance for the title insurance company.

**List counties of operation you want to add to the existing appointment or direct operation.** If more space is needed, attach another page.

_____	_____	_____
_____	_____	_____

► **Fill out this section to remove counties of operation from an existing appointment or direct operation**

- **If this is for an existing appointment:** List all counties where the title insurance agent or direct operation may no longer act for the title insurance company.
- **If this is for an existing direct operation:** List all counties where the direct operation will no longer write, sign, or deliver title insurance for the title insurance company.

**List counties of operation you want to remove from the existing appointment or direct operation.** If more space is needed, attach another page.

_____	_____	_____
_____	_____	_____

► **Fill out this section to end an appointment**

The title insurance agent or direct operation's appointment will end on \_\_\_\_\_  
Date

**Is this appointment ending for cause such as a misrepresentation or misappropriation?**  Yes  No

📎 If you answered "Yes," attach a statement with details.

An appointed title insurance agent must follow Administrative Rule D-1 of the Title Insurance Basic Manual ([www.tdi.texas.gov/title/titleman.html](http://www.tdi.texas.gov/title/titleman.html)) if:

- A title insurance company is the only underwriter for the title insurance agent when the appointment ends.

and

- The title insurance agent is not seeking an appointment by another title insurance company.

► **As the contact for this form, I confirm that:**

- This form was filled out by a representative of the title insurance company.
- I am authorized to sign for the title insurance company.
- The title insurance agent or direct operation has a current Schedule D. (See Procedural Rule P-21 of the Title Insurance Basic Manual, [www.tdi.texas.gov/title/titleman.html](http://www.tdi.texas.gov/title/titleman.html).)
- The title insurance agent or direct operation has a contract with the title insurance company, if applicable.
- The title insurance agent or direct operation has:
  - An abstract plant that meets the requirements of Procedural Rule P-12 of the Title Insurance Basic Manual ([www.tdi.texas.gov/title/titleman.html](http://www.tdi.texas.gov/title/titleman.html)) and Texas Insurance Code 2501.004.
  - or
  - A subscription agreement for each county in which the title insurance agent or direct operation is appointed to transact business for the title insurance company.

► **Sign here:**

I confirm that all statements, supporting forms, schedules, documents, and exhibits given for this license are true and correct.

\_\_\_\_\_  
Contact's signature

\_\_\_\_\_  
Date

**\*\* You must get a notary public signature on this form. See next page. \*\***

► **To be filled out by a notary public:**

State of \_\_\_\_\_

County of \_\_\_\_\_

Before me, notary public, on this day personally appeared \_\_\_\_\_,  
Contact's name

known to me to be the person whose name is subscribed to the foregoing document and, being by me first duly sworn, declared that the statements therein contained are true and correct.

(Personalized seal)

\_\_\_\_\_  
Notary public's signature

► **Return this form and any attachments**

**Mail:**

Texas Department of Insurance  
Title Licensing, Mail Code CO - AAL  
PO Box 12030  
Austin, Texas 78711-2030

► **Questions?**

Use our online question form at [www.tdi.texas.gov/agent/question.html](http://www.tdi.texas.gov/agent/question.html),  
email: [TDI-TitleLicensing@tdi.texas.gov](mailto:TDI-TitleLicensing@tdi.texas.gov), or call: 512-676-6475.

► **Your rights:**

You can request information we have about you by emailing [OpenRecords@tdi.texas.gov](mailto: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](mailto: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.