



# General Insurance Council of Saskatchewan

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## Restricted Travel Insurance Agent/Salesperson Application

If you have any questions about this application contact the General Insurance Council of Saskatchewan or visit our web site.

Council's regular business hours are Monday to Friday, 8:00 a.m. to 4:30 p.m.

**Incomplete Applications – any missed items as listed below will be returned without processing.**

- Responses to any required information or question.
- Relevant attachments or supporting documents.
- Required signatures.
- Required fee.

### Application Fees

The application fee for obtaining a licence is \$50 (please note the licensing fee is subject to change).

Please refer to the last page of this application form to obtain the payment options available.

### Submitting Applications

All licence applications must be reviewed and signed by your sponsoring agency prior to forwarding to Council for consideration at:

Licensing Department  
Insurance Councils of Saskatchewan  
310 – 2631 – 28<sup>th</sup> Avenue  
Regina SK S4S 6X3

Tel: 306.347.0862  
Fax: 306.347.0525

[www.skcouncil.sk.ca](http://www.skcouncil.sk.ca)

*This application applies to individuals who will be transacting Travel insurance.*

*Travel insurance includes cancellation, baggage and out of province medical.*

*This licence entitles the Salesperson to sell solely for the Travel Agency named in the licence.*

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## Security Clearance

### Instructions

Criminal record checks must accompany all initial Saskatchewan applications for licensing. This applies to first time applicants, individuals who have not held a licence for more than one year or individuals who have to re-qualify for licensing.

- Have the local police or RCMP detachment conduct a criminal record check based on a name search. You must apply to the police service that serves the area in which you reside.
- If a possible record is indicated, you will be required to have this verified by a fingerprint check.
- The completed original Security Clearance Report must be attached to the application form. The report may not be dated in excess of six months.
- Any costs associated with the record check are the responsibility of the applicant.

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Reason for request	Licence issuer
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Insurance Licence	General Insurance Council of Saskatchewan 310 – 2631 – 28 <sup>th</sup> Avenue Regina SK S4S 6X3
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December 6, 2006

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# General Insurance Council of Saskatchewan

## Restricted Travel Insurance Agent/Salesperson Application, \$50

For ICS use only	Received Date
Receipt No.	
Licence No.	
Date Issued	

### Part A: Identification Information

Mr.     Mrs.     Miss     Ms.

Last name

First name (in full)

Middle name(s) (in full)

Preferred first name

Maiden name

Previous surname(s)

**Birth Date**

**Sex**

M M | D D | Y Y Y Y

M     F

### Place of residence

Number and Street, Apt., etc.

Personal telephone

(    )

Personal fax

(    )

City/Town

Province/  
State

Postal Code/  
Zip Code

Personal e-mail

### Address mail will be sent to (complete only if different than home address)

Business name (if applicable)

Business telephone and extension

(    )

Cell Phone

(    )

Number and Street, Suite, etc.

Business Fax

(    )

City/Town

Province/  
State

Postal Code/  
Zip Code

Business e-mail



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## Part F: Consent to the Collection, Use and Disclosure of Information

By applying for an insurance licence or the continuation of my insurance licence, I understand personal information will need to be collected from me and from other sources such as the sponsor of my licence, financial service regulators, law enforcement agencies, credit bureaus, insurance companies, previous employers or other organizations in the financial services sector. I, therefore, consent to the collection and use of this personal information for the purpose of determining my suitability for licensing or the continuation of my licence.

I further understand and consent to disclosing personal information to the sponsor of my licence, financial service regulators, law enforcement agencies, credit bureaus, insurance companies or other organizations in the financial services sector, in order determine my suitability for licensing or the continuance of my licence.

**X**

Signature of applicant

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## Part G: Declaration

The making of a false statement on this application constitutes a material mis-statement and may result in the refusal of this application and the subsequent suspension or cancellation of any licence issued. This application is required to be personally signed by the applicant named herein.

I, \_\_\_\_\_, solemnly declare that all statements and answers in the foregoing application including attachments are true and correct, and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

**X**

Signature of Applicant

Date signed

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## Part H: Sponsor Declaration

*To be completed by the licensed agency sponsoring you.*

*Please Print*

Applicant's Name \_\_\_\_\_

Is hereby sponsored and authorized to act as an insurance salesperson

The sponsor certifies that the qualifications and business record of the applicant have been investigated and that the applicant is a trustworthy and competent person to receive a licence.

To the best of my knowledge, information and belief, all statements and answers contained in the foregoing application are true and correct.

It is understood, if and when this licensee ceases to represent the sponsored named herein, written notice will be given to the General Insurance Council of Saskatchewan within five days of termination including the reason for termination.

**THE ABOVE APPLICANT WILL NOT ACT AS AN INSURANCE SALESPERSON UNTIL THE LICENCE IS ISSUED**

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**Print Name of Sponsor**

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**Authorized Officer**  
Print Name

Signature

Date

MM | DD | YYYY

Phone number

Fax number

E-mail address

(       )

(       )

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## Attachments to the application form

Details if you have answered yes to Part D

The original Non-resident Endorsement, if applicable

The original Security Clearance Form

Payment of licence fee

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April 29, 2010

### Payment information (Please choose a payment option below)

Cheque or money order enclosed for full amount

Or

Charge my credit card for the full amount

VISA

MasterCard

Make cheque or money order payable to the **Insurance Councils of Saskatchewan**.

A NSF charge of \$25 will apply for returned cheques.

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Card Number

\_\_\_\_\_-\_\_\_\_\_  
Expiry Date

Signature \_\_\_\_\_

Print name of applicant \_\_\_\_\_

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Insurance Councils of Saskatchewan  
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