



WITHDRAWAL OF A DELAWARE DOMESTIC INSURANCE COMPANY

The following documents are required to file an application to withdraw a Certificate of Authority to do business in the State of Delaware:

- Letter outlining the reason for the request to withdraw addressed to the attention of Linda Sizemore, CPA, CFE, Chief Financial Examiner, and Acting Director of Company Regulation.
- Return original Delaware Certificate of Authority presently issued to the Company. If the original cannot be located, complete and return attached UCAA Form 15.
- Notarized statement signed by an Officer of the Company stating there are no outstanding policies, claims and related liabilities in the State of Delaware.
- If policies are in force, submit documentation for approval by the Department regarding transfer or assumption of existing business, or summary of company's plan to run-off any existing business.

Securities on Deposit: Delaware law, 18 Del. C. §1512(b), requires advertising for four (4) weeks prior to the release of statutory deposits. After completion of the advertising, and if there are no objections to the release, the Department will authorize the escrow agent to close the account and wire funds as instructed.

The Department will have an Examination conducted for a final accounting of the Company's assets and liabilities, and to determine if there are any outstanding fees due the Department (i.e., premium taxes, examination fees).

Contact: Dorothy J. Speight, Insurance Compliance Specialist, (302)674-7344; FAX: 302-739-2709; Dorothy.Speight@state.de.us.

Dated: June 11, 2010

Applicant Name: _____

NAIC No.: _____

FEIN: _____

AFFIDAVIT OF LOST CERTIFICATE OF AUTHORITY

STATE OF _____)

COUNTY OF _____)

BEFORE ME, the undersigned authority, on this day personally appeared

who after being by me duly sworn upon oath deposes and states:

That he/she is the _____ of
(Position with Company)

(Name of Company)

_____, _____
(City of domicile) (State of domicile)

and that he/she has custody and control of the minutes and other records of said corporation and that diligent search has been made for the current Certificate of Authority issued to said corporation by the _____
(State Department of Insurance)

This said Certificate of Authority, issued in _____, can not be located and is considered lost, misplaced or
(Year)

destroyed and it is therefore impossible to surrender said Certificate to the _____. In the event
(State Department of Insurance)

that original Certificate of Authority is located, the company will immediately return the Certificate of Authority to the

(State Department of Insurance)

DATED this the _____ day of _____, 20_____

(Signature)

State of _____

County of _____

Personally appeared before me the above named _____ personally known to me, who, being duly sworn, deposes and says that he/she executed the above instrument and that the statements and answers contained therein, are true and correct to the best of his/her knowledge and belief.

Subscribed and sworn to before me this _____ day of _____, 20_____

(Notary Public)

(SEAL)

My commission expires: _____