APPENDIX C

STATE OF NEW JERSEY APPLICATION FOR REGISTRATION AS A PURCHASING GROUP

(All information should be typed)

1.	List the exact name of the Purchasing Group.						
2.	Indicate the form of organization or incorporation and date.						
3.	The Purchasing Group is domiciled in the State of:						
4.	List any other names under which the Purchasing Group or may be doing business in this State or any other State different from above.						
5A.	List the complete physical address of the Purchasing Group.						
5B.	List the mailing address of the Purchasing Group.						
6A.	List the name, title, address, fax number, and telephone number of the principal officer of the purchasing group who has knowledge of its insurance program, including membership criteria, coverages, and key personnel of the group's administrator and insurance carrier.						
6B.	List the name, title, address, fax number, and telephone number of the firm that acts as the administrator of the purchasing group and the name of the principal account executive responsible for the group's insurance program. (If none, answer none.)						
7.	List the names, addresses and occupation of the principal officers and directors of the Purchasing Group. Attach additional pages if necessary. Principal Officers Principal Directors						

8.	Give a general description of the business or activities engaged in by purchasing group members:
9.	List the lines and classification of liability insurance Purchasing Group will purchase:
10.	What are the limits of liability including per occurrence, aggregate per participant and group aggregate.
11.	Deductible and self-insurance retentions (a) Which are the responsibility of the individual participant?
	(b) Which are the responsibility of the purchasing group and how funded?
12.	List the insurance carriers from whom the Purchasing Group will purchase liability insurance described in item (9) above. Give full name of company, state of domicile and NAIC#:
	Purchasing groups procuring insurance through companies licensed in New Jersey or registered Risk Retention Groups must use an insurance producer pursuant to N.J.S.A. 17:22A-26 et seq. Please identify the producer(s) representing the purchasing group: Name Address Phone No. Producer License Reference Number:
14.	Purchasing groups procuring insurance from New Jersey eligible surplus lines companies must place it through a licensed New Jersey insurance producer with surplus lines authority pursuant to N.J.S.A. 17:22-6.40 et seq. and 17:22A-26 et seq. Please identify the producer(s) representing the purchasing group: Name Address Phone No. Producer License Reference Number:
15.	List who will adjust the claims: Name Address
16.	Phone No. Producer License Reference Number: Has any person transacting business on behalf of this Purchasing Group ever: (A) been arrested, indicted and convicted of a felony or is a felony charge currently pending against any such person? (B) had denied any application for a professional,

(C)	had suspended or	revoked	any su	ch license?			
(D)	had withdrawn or su license to avoid pot licensee?						
If th	he answer to any part	of this qu	estion is	yes, attach a			
	plementary statement						
occi	urrence.		-				
The	items described be	low should	l be atta	ched to the			
regi	registration form:						
(a)	, 1 , 2						
	amount of \$100.00 made payable to the "State of New						
	Jersey—General Trea						
(b)							
(c)							
	Purchasing Group and the individuals who are						
		rative ser					
	influence or control t						
(d)							
	potential members, or provide written evidence that the						
	purchasing group is registered in its state of domicile.						
	• The Purchasing Group is composed of members						
	whose business or activities are similar or related with						
	respect to the liability to which members are exposed						
	by virtue of any related, similar, or common business trade, product, services, premises or operations.						
	•The Purchasing Group purchases such liability insurance only for its members and only to cover their						
	similar or related li						
	item (8) above.	іавініў ехр	osure, as	described in			
	• The policy or policy	y form carti	fication a	e annlicable			
	and promotional m						
	use has been forwar						
In a	ddition, all required d						
	1 et seq., N.J.S.A. 17:						
	are being included in the		oq. una rv.	.5.71.0. 11.2			
200	are some moraded in the						
		Presider	nt or Chie	ef Executive			
		Officer					
		Secretar	y				
	efore me this	_					
day of _		,					
	·						
		-					
	Public, State of:						
My Con	nmission Expires:						