

**Ohio Department of Insurance**

John R. Kasich – Governor  
Mary Taylor – Lt. Governor/Director



***Application for Renewal of Certificate of Authority***

**Fraternal Benefit Societies, Title Companies, and Mutual Protective Associations**

Place Bar Code Here

Federal I.D. \_\_\_\_\_ NAIC Number \_\_\_\_\_ Date: \_\_\_\_\_

The \_\_\_\_\_  
(Company Name)

of \_\_\_\_\_ in the State of \_\_\_\_\_  
(Statutory City) (State)

hereby applies for a Certificate of Authority to transact in the State of Ohio, in accordance with the laws thereof,  
the business of (\*) \_\_\_\_\_

insurance on the \_\_\_\_\_ plan in the State of Ohio, in accordance with the  
(Stock or Mutual)  
laws of the State governing such companies.

President or  
Vice President \_\_\_\_\_

Secretary \_\_\_\_\_

\* It is essential that the classes of insurance listed are limited to the classes of business authorized by the Company's home state.