Application Completion Check List

An application must be complete and correct before an exam permit or license can be issued. This checklist covers the most common reasons for applications to be returned unprocessed. If you are unsure of a response check the full instructions with these forms on the Arkansas Insurance Department website:
www.insurance.arkansas.gov/license/divpage.htm

Application:

- ☐ The application must have your **legal name** (the name on your birth certificate). You cannot use **Nicknames.**
- ☐ A resident physical address is required even if you cannot or do not get mail at that address.
- ☐ You must complete the information for mailing address even if it is the same as the residence. Do not write same as above or use ditto.
- ☐ Employment History: Must **show 5 years**, must show **Name of Employer**, and **Position Held,** show city and state and make sure that dates do not overlap.
- ☐ Question 38: The license type should be **P** for producer under **License Type**
- ☐ 38 a and 38b if yes give approximate date and license type 38a and type of license. 38b if yes give name of state, license type and approximate date of license.
- ☐ Check the line of insurance in the box under **Major Lines of Authority** . Check Life, AHS or P & C. Life and AHS (Health) are separate exams.
- ☐ If you are making an application for **Limited Line of Authority** which does not require an exam then check line that applies—Credit, Crop, Travel, Surety or Other (for line of authority not listed on the application such as Funeral Expense or Pre-Paid Legal. If you check **other** then write in the type of limited line authority you are requesting.
- ☐ Question 39 (1-7) must respond to all questions-if you answer yes to a question, you must provide a **detailed statement and documentation**.
- ☐ The signature must be your **legal name** and it must the same as the name on the front page of the application.
- ☐ **Print your name**---signatures are not always legible.
- ☐ Review or double check the application to ensure all questions has a response. All fields must have a response with the exception of 2,3,18,19,20,21,22,23,24,25,26,27,28,and 36. If an item does not apply put (N/A).
- ☐ If you have a mistake-draw a line through the error, place your initials near the error and the add the **Correction.** Do not use white out or blot out the bad information.

For Applications for the Exam or Major Lines of Authority.

- ☐ Make your business check, money order or cashier's **check payable to Pearson VUE**
- ☐ **Do not alter money orders or checks.**
- ☐ **Mail the application to Pearson VUE**---not the Insurance Department.

For Applications for Limited Lines of Authority.

- ☐ Make your check, money order or cashier's check payable to the Arkansas Insurance Department
- ☐ Do not alter the money order or check.
- ☐ Mail the application to the Arkansas Insurance Department

Criminal Background Form:

- ☐ All items must have a response
- ☐ Must have your full **Legal Name** and it must match the name on the application. Do not leave the middle name blank-use full middle name. The name order is different from the Application on the ASP-it is first name, middle and then last name.
- ☐ **State of Birth**—if you were born in another country list the country of birth.
- ☐ **Race:** please use one of the following: Black, Asian/Pacific Islander, White, Hispanic, American Indian or Unknown.
- ☐ Mailing address must be the same as the mailing address on the application.
- ☐ **Release of Search Results** must always show the Arkansas Insurance Department.
- ☐ **Do not sign the form** until you are in front of the **Notary**
- ☐ The signature must be your full **Legal Name**
- ☐ The date signed must match the notary date.
- ☐ **Do not change** the date signed or the notary date
- ☐ Your business check, money order or cashier's check must be made payable to **Arkansas Insurance Department**
- ☐ The criminal background form is mailed with the application to Pearson VUE