



**COMMONWEALTH OF MASSACHUSETTS  
Office of Consumer Affairs and Business Regulation  
DIVISION OF INSURANCE**

1 Federal Street, Suite 700  
Boston, MA 02110  
(617) 521-7794  
[www.mass.gov/doi](http://www.mass.gov/doi)

**Application for New and Renewal Registration as a Service Contract Provider  
In the Commonwealth of Massachusetts  
As Required By M.G.L. c. 175, § 149N**

To: The Office of the Commissioner of Insurance

         **New Application**               **Renewal Application**

Is hereby made for a Certificate of Registration pursuant to M.G.L. Chapter 175 Sections 149M-X, and in support thereof, the following information and documentary evidence is submitted for review:

[1] Name of Service Contract Provider: \_\_\_\_\_

FEIN: \_\_\_\_\_

Street Address of Provider: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Toll Free Number: \_\_\_\_\_

[2] Provider Contact Person: \_\_\_\_\_

Contact Person Address: \_\_\_\_\_

Contact Person Telephone Number: \_\_\_\_\_

Contact Person FAX Number: \_\_\_\_\_

Contact Person Email Address: \_\_\_\_\_

[3] Name of Person Designated for Service of Process in the Commonwealth: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX Number: \_\_\_\_\_

Email address: \_\_\_\_\_

[4] Name of Insurer Issuing reimbursement Insurance Policy: \_\_\_\_\_

Address of Insurer: \_\_\_\_\_

Insurer's NAIC Number: \_\_\_\_\_

***Service Contract Providers who do not insure all service contracts under a reimbursement insurance policy in conformance with Chapter 175, Section 149N(d)(1) must comply with the requirements of Sections 5 AND 6 below, OR Section 7.***

- [5] Provide proof that the Service Contract Provider maintains a funded reserve account for its obligations under its contracts issued and outstanding in Massachusetts that is not less than 40 percent of its gross consideration received, less claims paid, on the sale of the service contract for all in-force service contracts. Such accounts are subject to review by the Commissioner.
- [6] Attach a security deposit to be held in trust with the Commissioner of not less than 5 percent of the gross consideration received, less claims paid, on the sale of the service contract for all in-force service contracts, but not less than \$25,000, consisting of one of the following:
- a) surety bond issued by an authorized surety;
  - b) securities of the type eligible for deposit by Massachusetts carriers;
  - c) cash;
  - d) a letter of credit issued by a qualified financial institution; or
  - e) another form of security authorized by the Commissioner.
- [7] In lieu of the requirements in sections five and six above, the Service Contract Provider, or together with its parent company, must prove that it maintains a net worth or stockholders' equity of \$25,000,000 and must on request provide the Commissioner with copies of the Provider's most recent Form 10-K or Form 20-F within the last calendar year, or if the company does not file with the United States Securities and Exchange Commission, a copy of the financial statements showing a net worth of at least \$25,000,000.

**Per MGL c. 175, 149V (c), "warranties, service contracts or other agreements regarding automobiles..." are deemed *insurance products* in Massachusetts and must be approved by the Division for sale in Massachusetts.**

This application should be emailed to [Companies.Mailbox@mass.gov](mailto:Companies.Mailbox@mass.gov). It is preferred that the payment is sent via OPTins. However, if you choose to mail a check, please make the check payable to The Commonwealth of Massachusetts.

Any questions on this application should be directed to [Companies.Mailbox@Mass.gov](mailto:Companies.Mailbox@Mass.gov).