



# RENEWAL APPLICATION INSURANCE BROKER/SPECIAL BROKER

Indicate which type of licence you are renewing:  Broker  Special broker (business with unlicensed insurers)

Last name		First name		Middle name(s)	
Name of brokerage applicant is representing					
Brokerage address			City	Prov/Terr	Postal Code
Business phone		Business email			
Home address			City	Prov/Terr	Postal Code
Home phone		Cell phone	Personal email		

1. Do you currently hold an insurance broker's licence in another Canadian province or territory?  Yes  No

If yes, see Renewal Checklist (page 2) for additional documents required.

If yes, has your licence ever been suspended or otherwise terminated?  Yes  No

If yes, by whom, and for what reason? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Have you ever been refused a licence as an insurance agent or broker in Yukon or elsewhere?  Yes  No

3. If this renewal application is granted, do you propose to engage in any business other than that of an insurance broker?  Yes  No

If yes, state:

(a) The name and nature of such business \_\_\_\_\_

(b) The position you occupy in such business \_\_\_\_\_

(c) The portion of your time you intend to devote to insurance \_\_\_\_\_

4. What previous experience have you had in the insurance business? \_\_\_\_\_  
\_\_\_\_\_

## RENEWAL CHECKLIST

You must complete all sections of this form and include the following:

- |   |   |
|---|---|
| • The applicable fee (see below)  | <input type="checkbox"/> Attached                                 |
| • If you are a non-resident of Yukon, documentation from your home jurisdiction that shows: <ul style="list-style-type: none"><li>• your name</li><li>• your licence number</li><li>• your current licence status or licence expiry date</li></ul> As long as all of the above information is included, any of the following are acceptable: <ul style="list-style-type: none"><li>• a recent printout from your home regulator's website</li><li>• a copy of your licence</li><li>• a certificate of authority from your home regulator</li><li>• any combination of the above</li></ul> | <input type="checkbox"/> Attached                                 |
| • Special brokers must include proof of surety of not less than \$5000, made out to the Superintendent of Insurance in Yukon.   | <input type="checkbox"/> Attached<br><input type="checkbox"/> N/A |

**Note: we cannot process your application until all documents and fees have been received.**

## FEES

### Yukon resident

- Broker: \$50
- Special broker with unlicensed insurers: \$200

### Non resident

- Broker: \$100
- Special broker with unlicensed insurers: \$400

### Payment options are:

- |   |                                   |
|---|-----------------------------------|
| • Cheque - payable to Government of Yukon   | <input type="checkbox"/> Attached |
| • Credit card – complete credit card information form found at <a href="http://www.insurancelicensingyukon.ca">www.insurancelicensingyukon.ca</a> | <input type="checkbox"/> Attached |

### Send your completed form, fees and supporting documents by mail or courier to:

#### Mail:

Professional Licensing and Regulatory Affairs, C-5  
P.O. Box 2703, Whitehorse, YT Y1A 2C6

#### Courier or dropoff:

Professional Licensing and Regulatory Affairs  
307 Black Street, Whitehorse, YT Y1A 2N1

**We are unable to accept payments sent by email or fax. Thank you for your cooperation.**

## DECLARATION OF APPLICANT

I hereby certify that to the best of my knowledge the statements and answers to questions contained in the foregoing application are true and correct. I also certify that:

1. I am not an agent of any insurance company.
2. This application is not made for the purpose of obtaining a licence to act as an insurance broker in respect of any particular individual risk or risks.
3. This application is made in good faith upon my own behalf and not on behalf of any person who is not competent to receive a licence, and upon receipt of a licence pursuant hereto, I intend to hold myself out publicly and carry on business in good faith as an insurance broker.

\_\_\_\_\_  
Applicant name (print)

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

**Questions?** Visit [www.insurancelicensingyukon.ca](http://www.insurancelicensingyukon.ca) or contact Professional Licensing and Regulatory Affairs at 867-667-5940 or by email at [insurance.plra@gov.yk.ca](mailto:insurance.plra@gov.yk.ca)