LINDA LINGLE GOVERNOR

JAMES R. AIONA, JR. LT. GOVERNOR



MARK E. RECKTENWALD DIRECTOR

J.P. SCHMIDT INSURANCE COMMISSIONER

STATE OF HAWAII INSURANCE DIVISION DEPARTMENT OF COMMERCE & CONSUMER AFFAIRS P. O. BOX 3614 HONOLULU, HAWAII 96811-3614

December 30, 2003

Memorandum 2003-10E

TO: All Surplus Lines Brokers & Persons Independently Procuring Surplus Lines Insurance

FR: J.P. Schmidt, Insurance Commissioner

RE: Definition of "Gross Premiums" for Surplus Lines Tax

This memorandum is sent as an advisory opinion in response to various inquiries as to the interpretation of "gross premiums" under Hawaii Revised Statutes ("HRS") sections 431:8-205 and 431:8-315 as it applies to independently procured surplus lines insurance and surplus lines brokers who hold a Hawaii license, respectively.

HRS section 431:8-205(c) states:

"Gross premiums charged for the insurance, less any return premiums, are subject to a tax at the rate of 4.68 per cent. At the time of filing the report required in subsection (b), the insured shall pay the tax to the commissioner."

HRS section 431:8-315(a) states in relevant part:

"Each surplus lines broker shall pay to the director of finance, through the commissioner, a premium tax on surplus lines insurance transacted by such broker during the preceding calendar year. The tax shall be in the amount of 4.68 per cent of gross premiums, less return premiums, on taxable surplus lines insurance."

Effective January 1, 2004, "gross premium" means the amount of the policy or coverage premium charged by the insurer in consideration for the insurance contract. Any charges for policy, survey, inspection, service, or similar fees or other charges added by the broker are not considered part of gross premium. If you should have any questions regarding the above, please contact Roderick Uyehara at (808) 586-3874 or Gale Miyazaki at (808) 586-8151 or write to the Commissioner at the address above.

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P. O. Bo	STATE OF HAWAII F COMMERCE AND CO INSURANCE DIVISION ox 3614, Honolulu, HI 96 t Street, 2 <sup>nd</sup> Floor, Hono PREMIUMS RECEIVED	811-3614 Diulu, HI 96813	RPOSES
For Period			
Name of Insurer:			
Address:			
SUMM	ARY OF PREMIUMS AN	D TAXES	
	Premiums subject to tax (item 5, page 2)	Rate <u>of Tax</u>	Amount <u>of Tax</u>
1. Premiums - \$0 to \$25,000,000	\$	0.25%	\$
2. Premiums - \$25,000,001 to \$50,000,000	\$	0.15%	\$
3. Premiums - \$50,000,001 +	\$	0.05%	\$
4. TOTAL (sum of lines 1, 2 and 3)	\$		\$
PLEASE PROVIDE COMPLETE SUPPORT FO	R ANY CREDITS TAKE	۷:	
5. Credits:			
Prior Year Overpayments	\$		
Other (explain)	\$		
TOTAL CREDITS			\$
6. If line 4 is larger than line 5, ENTER BALANC (Payable to DEPARTMENT OF COMMERC		- AIRS)	\$
<ol> <li>If line 5 is larger than line 4, ENTER REFUNI</li> </ol>		-	¢
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State of			
City & County of			
	, being dul	sworn, deposes and	says: That (he/she is) the
accompanying exhibits are to the best of (his/he good faith, for the taxable periods stated.	e Insurer whose name a r) knowledge, informatio	n and belief, true and	t this Statement, and the complete returns, made in
Subscribed and sworn to before me this			
day of, 20		Signature of O	fficer of Insurer
Notary Public, State of My Commission expires:			
		- 1999 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990	

FILING DATE: March 1 FILE THIS SUMMARY PAGE with original signatures and notarized, and exhibit 1. The Certificate attesting to the authority of the notary is not required and need not be attached.

	-	Name of Insurer
EXHIBIT NO .:	1	
INFORMATION	: Premium Statement for period	·
APPLICABLE T	O:	
1. Gross Premi	ium written.	
a.	Direct writing for risk in Hawaii \$	
b. Direct writing for risk elsewhere\$		
С.	c. Reinsurance	
d.	Other (explain in detail on separate sheet)	
2. TOTAL GRO	DSS PREMIUM (calendar year)	\$
3. LESS:		
a.	Return premiums	
b.	Reinsurance accepted (the tax upon such business being payable by the direct writing insurer)\$	
C.	Direct writings for which premium tax was paid in another jurisdiction, other than Hawaii)	
d.	Other (explain in detail on separate sheet)	
4. TOTAL DED		\$
5. PREMIUMS (Allocate to	SUBJECT TO TAX, item 2 minus 4 lines 1, 2 and 3 on page 1)	\$