

DAVID Y. IGE GOVERNOR JOSH GREEN LIEUTENANT GOVERNOR

NAME OF INSURER:

STATE OF HAWAII DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS INSURANCE DIVISION

335 MERCHANT STREET, ROOM 213, HONOLULU, HAWAII 96813 P.O. BOX 3614, HONOLULU, HAWAII 96811 Phone Number: (808) 586-2790 Fax Number: (808) 586-2806 insurance.hawaii.gov CATHERINE P. AWAKUNI COLÓN DIRECTOR

JO ANN M. UCHIDA TAKEUCHI DEPUTY DIRECTOR

COLIN M. HAYASHIDA INSURANCE COMMISSIONER

SALES & CLAIMS OFFICE INFORMATION FORM

(PLEASE PRINT)

NAIC #:	
SALES OFFICE	
NAME OF AGENT or AGENCY:	
HAWAII BUSINESS ADDRESS:	
PHONE #:	
EMAIL ADDRESS:	
<u>CLAIMS OFFICE</u>	
NAME OF AGENT or AGENCY:	
NAME OF INDEPENDENT ADJUSTER:	
HAWAII LICENSE #:	
HAWAII BUSINESS ADDRESS:	
PHONE #:	
EMAIL ADDRESS:	

Please return the completed form to Todd Dixon at the address above. If you have any questions regarding this form, please contact Todd Dixon at tdixon@dcca.hawaii.gov<u>or Frances Lo at FLo@dcca.hawaii.gov</u>.