



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

DAVID Y. IGE
GOVERNOR
JOSH GREEN
LIEUTENANT GOVERNOR

CATHERINE P. AWAKUNI COLÓN
DIRECTOR
JO ANN M. UCHIDA TAKEUCHI
DEPUTY DIRECTOR
COLIN M. HAYASHIDA
INSURANCE COMMISSIONER

TO: FOREIGN RISK RETENTION GROUP (RRG) & RISK
PURCHASING GROUP (PG) REGISTRATION,
HAWAII INSURANCE DIVISION

SUBJECT: Annual Service Fee Contact Person and Address Information

Please complete the following information and return
this form via Email to sbautista@dcca.hawaii.gov.
Submit via OPTins a \$150 for the Annual Service
Fee.

PLEASE PRINT

Name (RRG or PG)	
NAIC Co Code (RRG)	
Contact Address	
Contact Person & Title (For Annual Fee)	
Phone Number	
Fax	
E-mail	

Group officer: _____ Title: _____

Signature: _____ Date: _____

If you have any questions regarding this form,
Send email to SBautista@dcca.hawaii.gov