

JOSH GREEN, M.D.
GOVERNOR
SYLVIA LUKE
LIEUTENANT GOVERNOR

STATE OF HAWAII DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS INSURANCE DIVISION

NADINE Y. ANDO

GORDON I. ITO
INSURANCE COMMISSIONER

335 MERCHANT STREET, ROOM 213, HONOLULU, HAWAII 96813
P.O. BOX 3614, HONOLULU, HAWAII 96811
Phone Number: (808) 586-2790
Fax Number: (808) 587-6714
insurance.hawaii.gov

TO: Interested and Affected Parties

DATE: January 20, 2023

RE: Hannover Life Reassurance Company of America (Bermuda) Ltd. – Reciprocal

Reinsurer Passport Application

Pursuant to section 431:4A-101 of the Hawaii Revised Statutes and section 16-168-7 of the Hawaii Administrative Rules, this constitutes notice that Hannover Life Reassurance Company of America (Bermuda) Ltd. has filed a Reciprocal Reinsurer Passport Application (the "Application") with the Hawaii Insurance Division.

Interested and affected parties will have 30 days from the date of this posting to submit written comments and responses to Company's application to the Hawaii Insurance Division. The Commissioner may not take final action on an application until at least 30 days after posting notice.

The purpose of the comments and responses is to gather information, and to provide certain interested and affected parties with an opportunity to present statements to the Commissioner concerning the Application.

All responses regarding the applications should be directed to:

Hawaii Insurance Division Certification Section PO Box 3614 Honolulu, HI 96811-3614

Phone: (808) 586-3870

Email: insexam@dcca.hawaii.gov

Submission of response via email is preferable.