

JOSH GREEN, M.D. GOVERNOR | KE KIA'ĂINA

SYLVIA LUKE LIEUTENANT GOVERNOR | KA HOPE KIA'ĂINA STATE OF HAWAII | KA MOKUʻĀINA ʻO HAWAIʻI DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS KA ʻOIHANA PILI KĀLEPA 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) 587-6714

cca.hawaii.gov/ins/

TO:	Interested and Affected Parties
DATE:	July 31, 2023
RE:	General Reinsurance AG – 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 General Reinsurance AG 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: <u>insexam@dcca.hawaii.gov</u>

Submission of response via email is preferable.

NADINE Y. ANDO DIRECTOR | KA LUNA HO'OKELE

GORDON I. ITO INSURANCE COMMISSIONER