



**OFFICE OF COMMISSIONER OF INSURANCE**  
COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER  
**Ralph T. Hudgens, Commissioner**



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**ANNUAL RENEWAL CHECK SHEET FOR GROUPS**

NON-TRADITIONAL ENTITIES  
 GID-239-NT SEP2015  
 (same as GID-239-EN)

Risk Purchasing Group     Risk Retention Group

**ENTITY INFORMATION**

Group Name \_\_\_\_\_

FEIN # \_\_\_\_\_ NAIC # \_\_\_\_\_

**MAILING ADDRESS**

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**DOMICILE ADDRESS**

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**CONTACT INFORMATION**

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

**PURCHASED INSURANCE DETAILS**

Lines of Liability Insurance Purchased \_\_\_\_\_

Name of Insurance Company(ies) with Domicile State \_\_\_\_\_

**LEGAL NOTIFICATION DESIGNEE**

Name \_\_\_\_\_ Title \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_