

Licensing Division  
50 W. Town St., 3rd Fl.  
Suite 300  
Columbus, OH 43215  
(614) 644-2665  
Fax # (614) 644-3475  
www.insurance.ohio.gov

## Ohio Department of Insurance

Mike DeWine – Governor  
Jillian Froment – Director



# HOME STATE CERTIFICATION LETTER REQUEST FORM

Requested by: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Name of Agent/Agency Certification is requested for: \_\_\_\_\_

National Producer Number(NPN): \_\_\_\_\_ or License Number \_\_\_\_\_

Number of Certification Letters Requested: \_\_\_\_\_

Mail Certification to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: (        ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

*The purpose of a Home State Certification Letter is to provide proof to a Non-Resident state that an agent is in good standing in the agent's home state. A Home State Certification Letter will ONLY be issued to an Ohio Resident Agent.*

### FORM OF PAYMENT:

**Certification Letters...\$2.00 each**

Personal Check

Company Check

Money Order

**\*\*\* ALL CHECKS/MONEY ORDERS MUST BE MADE PAYABLE TO THE  
"STATE OF OHIO TREASURER"**

Return completed form to **Ohio Department of Insurance, License Division, 50 West Town St, Suite 300, Columbus Ohio 43215.**