# STATE OF MARYLAND
## INSURANCE ADMINISTRATION
### CANDIDATE INFORMATION BULLETIN

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Please refer to our website to check for the most updated information at [www.psiexams.com](http://www.psiexams.com)

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Revised 10/1/2018
EXAMINATIONS BY PSI

This Candidate Information Bulletin provides you with information about the examination and application process for insurance licensing in the State of Maryland.

The Maryland Insurance Administration has contracted with PSI to conduct the examination program. PSI provides examinations through a network of computer examination centers in Maryland. PSI works closely with the State to be certain that examinations meet local as well as national requirements in basic principles and examination development standards.

EXAMINATION ELIGIBILITY AND APPROVAL PROCESS

PRE-LICENSING EDUCATION REQUIREMENTS

Pre-licensing education through a Maryland-approved provider, or an experience affidavit, is required for applicants. As a condition of initial licensure, and to be eligible to take the required examination, candidates must satisfy the education requirements found in the Pre-Licensing Requirements section of this document.

Your education provider will provide your eligibility to PSI upon successful completion of the course requirements. After your provider has submitted your file to PSI, you may visit www.psiexams.com or call 1-800-733-9267 to register and schedule your examination. Note, if PSI does not have record of your course completion, you must contact your education provider.

Candidates who complete the pre-licensing course and become eligible to take the exam will have six (6) months to successfully take and pass both portions of the appropriate Maryland licensing examination.

Candidates who do not pass the examinations within the six (6) month period will have to retake the pre-licensing course and apply to retake both portions of the examination. All questions and requests for information should be directed to PSI.

PSI licensure: certification
3210 E Tropicana
Las Vegas, NV 89121
(800) 733-9267 • Fax (702) 932-2666
www.psiexams.com

PRE-LICENSING EDUCATION WAIVERS

The Maryland Insurance Commissioner may waive the pre-licensing education requirement for an individual who:

- Holds an approved insurance designation,
- Has a qualifying level of work experience, or
- Has taken equivalent college courses.

The examination types which qualify for a waiver (in lieu of pre-licensing education) are: Life, Health, Property, Casualty, Title, and Personal Lines.

Unless a waiver has been approved by the Maryland Insurance Administration, candidates must complete a Maryland approved pre-licensing course. The Pre-Licensing Education Waiver Application form may be found on the MIA website.

Candidates who are granted a pre-licensing education waiver will have six (6) months to successfully take and pass both portions of the appropriate Maryland licensing examination.

Candidates who do not take or successfully pass both portions of the examinations within the six (6) month period will have to take a pre-licensing course and apply to retake both portions of the examination.

ON-LINE SERVICES

WWW.MDINSURANCE.STATE.MD.US

INITIAL LICENSING

Applications for initial licenses and registrations may be submitted online via NIPR (www.nipr.com). This service allows for a license to be issued within 72 hours, provided the on-line transaction, upon completion, receives an approved status. Applicants with an approved status may print the license via State Based Systems at www.statebasedsystems.com within 72 hours of approval.

Actively licensed producers attempting to add a line of authority to an existing producer license should not be required to submit an application. You will be able to view your license in 2-3 business days after passing the exam to verify the updated license. If your license has not been updated, please contact Producer Licensing Customer Service at 888-204-6198, option #5 or email at producerlicensing.mia@maryland.gov.

LICENSE RENEWAL / REINSTATEMENT

Current licensees may submit applications to renew or reinstate their license on-line via NIPR (www.nipr.com) using their resident state license number, National Producer Number (NPN), and last four (4) digits of the SSN or full FEIN. Applicants with an approved status may print the license via State Based Systems at www.statebasedsystems.com within 72 hours of approval.

ON-LINE PRINTING OF LICENSES

Current licensees may print copies of their Maryland license on-line, via State Based Systems at www.statebasedsystems.com. Licensees are allowed one free print following the approval of an initial or renewal transaction or any demographic or qualification change.

ON-LINE ADDRESS UPDATES

Current individual licensees may update their resident, business, and mailing addresses, on-line via NIPR (www.nipr.com) using the resident state license number, National Producer Number (NPN), and last four (4) digits of the SSN. Business entities may submit their request to producerlicensing.mia@maryland.gov. Licensees may not process updates that result in a change in the licensee's resident state.
ON-LINE LICENSE VERIFICATION

Current licensees may verify license information on line using the State Based Systems (www.statebasedsystems.com) Licensee Look-Up Tool. The Maryland Insurance Administration no longer issues a letter of certification or letter of clearance. The results page from the Licensee Look-Up tool or a Producer Database (PDB) printout may be used in lieu of the letter that was previously issued.
### Pre-licensing Requirements Guide for Producers

<table>
<thead>
<tr>
<th>Examination</th>
<th>Educational Requirements</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life Examination</td>
<td>Must meet requirements of EITHER #1 or #2 below:                                                                                     1. Satisfactory completion of a 20-hour study course given by an approved school or course provider.</td>
<td>Pre-licensing is not required of a candidate who holds one of the designations listed below:</td>
</tr>
<tr>
<td>Health Examination</td>
<td>2. Regular employment by an insurer, producer, or agency as described on the Affidavit contained in this bulletin. Must send the Affidavit to MIA for approval as a part of the examination registration process.</td>
<td>LIFE:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Certified Employee Benefit Specialist (CEBS)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Fellow of the Society of Actuaries</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4. Chartered Financial Consultant (ChFC)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5. Certified Insurance Counselor (CIC)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6. Certified Financial Planner (CFP)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7. Fellow Life Mgmt. Institute (FLMI)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8. Life Underwriter Training Council (LUTCF)</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>HEALTH</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1. Registered Health Underwriter (RHU)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Health Insurance Associate (HIA)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Certified Employee Benefit Specialist (CEBS)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4. Registered Employee Benefit Consultant</td>
</tr>
<tr>
<td></td>
<td><strong>LIFE / HEALTH</strong></td>
<td>The pre-licensing education waiver form may be found on MIA website and should be submitted for approval.</td>
</tr>
<tr>
<td></td>
<td>Must have license for Life.</td>
<td></td>
</tr>
<tr>
<td>Variable Examination</td>
<td></td>
<td>Applicants must have an active FINRA registration and have completed FINRA series 6, 7, or 63 examination(s). Resident applicants must successfully complete the appropriate securities exams and register with FINRA.</td>
</tr>
<tr>
<td></td>
<td>Property Examination</td>
<td>Must meet requirements of EITHER #1 or #2 below:                                                                                     1. Satisfactory completion of a 20-hour study course given by an approved school or course provider.</td>
</tr>
<tr>
<td>Casualty Examination</td>
<td>2. Regular employment by an insurer, producer, or agency as described on the Affidavit contained in this bulletin. Must send the Affidavit to MIA for approval as a part of the examination registration process.</td>
<td><strong>PROPERTY / CASUALTY</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Associate in Risk Management (ARM)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Certified Insurance Counselor (CIC)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4. Chartered Property/Casualty Underwriter (CPCU)</td>
</tr>
<tr>
<td></td>
<td>The pre-licensing education waiver form may be found on MIA website and should be submitted for approval.</td>
<td><strong>LIFE / HEALTH</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>The pre-licensing education waiver form may be found on MIA website and should be submitted for approval.</td>
</tr>
<tr>
<td>Personal Lines Examination</td>
<td>Must meet requirements of EITHER #1 or #2 below:                                                                                     1. Satisfactory completion of a 20-hour study course given by an approved school or course provider.</td>
<td>An applicant must take the Personal Lines examination only if he/she does not currently hold the Property and Casualty Lines of Insurance or has not passed the Property and Casualty exams within the last year.</td>
</tr>
<tr>
<td></td>
<td>2. Regular employment by an insurer, producer, or agency as described on the Affidavit of Employer contained in this bulletin; must send the Affidavit to MIA for approval as a part of the examination registration process.</td>
<td></td>
</tr>
<tr>
<td>Title Examination</td>
<td>Must meet requirements of EITHER #1 or #2 below:                                                                                     1. Satisfactory completion of a 20-hour study course given by an approved school or course provider.</td>
<td>Attorneys admitted to practice before the Court of Appeals of the State of Maryland are exempt from taking the examination.</td>
</tr>
<tr>
<td></td>
<td>2. Regular employment by an insurer, producer, or agency as described on the Affidavit of Employer contained in this bulletin; must send the Affidavit to MIA for approval as a part of the examination registration process.</td>
<td></td>
</tr>
<tr>
<td>Credit</td>
<td>None required</td>
<td></td>
</tr>
<tr>
<td>Travel</td>
<td>None required</td>
<td></td>
</tr>
</tbody>
</table>
## Pre-licensing Requirements Guide for Adviser and Public Adjuster

| Public Adjuster | May complete a 20-hour study course given by an approved school or course provider. | No examination is required of a person who: 1. is a member in good standing of the Society of Actuaries; or 2. has been conferred the C.L.U. designation and is a member in good standing of the “American Society of Chartered Life Underwriters and Chartered Financial Consultants”; or 3. has been conferred the Certified Employee Benefit Specialists designation; and is a member in good standing of the International Society of Certified Employee Specialists; or 4. has been conferred the Certified Financial Planner designation and whose designation is current and in good standing with the Certified Financial Planners Board of Standards; or 5. has been conferred the Certified Insurance Counselor designation by the Society of Certified Insurance Counselors (L&H) and is a member in good standing. The examination waiver form may be found on the MIA website and should be submitted for approval. |
| Adviser Life & Health Examination | None required | No examination is required of a person who: 1. is a member in good standing of the Casualty Actuarial Society; or 2. has been conferred the C.P.C.U. designation by The American Institute for Chartered Property and Casualty Underwriters and is a member in good standing of The Society of Chartered Property and Casualty Underwriters; or 3. has been conferred the Certified Insurance Counselor designation by the Society of Certified Insurance Counselors and is a member in good standing. The examination waiver form may be found on the MIA website and should be submitted for approval. |
| Adviser Property & Casualty Examination | None required | No examination is required of a person who: 1. is a member in good standing of the Casualty Actuarial Society; or 2. has been conferred the C.P.C.U. designation by The American Institute for Chartered Property and Casualty Underwriters and is a member in good standing of The Society of Chartered Property and Casualty Underwriters; or 3. has been conferred the Certified Insurance Counselor designation by the Society of Certified Insurance Counselors and is a member in good standing. The examination waiver form may be found on the MIA website and should be submitted for approval. |
| Adviser Variable Life | Must have license for Variable Life and Variable Annuity | No examination is required of a person who:  
1. is a member in good standing of the Society of Actuaries; or  
2. has been conferred the C.L.U. designation and is a member in good standing of the "American Society of Chartered Life Underwriters and Chartered Financial Consultants"; or  
3. has been conferred the Certified Financial Planner designation and whose designation is current and in good standing with the Certified Financial Planners Board of Standards; or  
4. has been conferred the Certified Insurance Counselor designation by the Society of Certified Insurance Counselors (L&H) and is a member in good standing.  
The examination waiver form may be found on the MIA website and should be submitted for approval. |
| SHOP Exchange Navigator | The regulation defines the required training program and indicates that it must be taken prior to the examination. Please contact MHBE directly to register for the training. The number for their call center is 1-855-642-8572.  
http://www.dsd.state.md.us/comar/SubtitleSearch.aspx?search=31.03.16.* |
The Maryland Insurance Administration
License Information

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<th>License Type</th>
<th>Pre-licensing Education Required</th>
<th>Exam Required</th>
<th>CE Required</th>
<th>Renewal Period Cycle</th>
<th>Appointment Required (To Write Business)</th>
<th>Bond Required</th>
<th>Residency Requirements</th>
<th>Applicant Type</th>
<th>License Fee &gt;1 Year from Renewal</th>
<th>License Fee &lt;=1 Year from Renewal</th>
<th>Renewal Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insurance Adviser</td>
<td>NO EDUCATION (Experience Required)</td>
<td>Y/N ▲</td>
<td>N</td>
<td>Biennial</td>
<td>N</td>
<td>Y</td>
<td>Resident or Nonresident</td>
<td>Individual Only</td>
<td>$200</td>
<td>$100</td>
<td>$215</td>
</tr>
<tr>
<td>Producer</td>
<td>Y/N ▲</td>
<td>Y/N ▲</td>
<td>Y/N ▲</td>
<td>Biennial</td>
<td>N</td>
<td>Y (TITLE ONLY)</td>
<td>Resident or Nonresident</td>
<td>Individual or Firm</td>
<td>$54</td>
<td>$54</td>
<td>$69</td>
</tr>
<tr>
<td>Motor Club Rep</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Annual</td>
<td>08/31</td>
<td>Y</td>
<td>Resident or Nonresident</td>
<td>Individual Only</td>
<td>$5</td>
<td>$5</td>
<td>$2</td>
</tr>
<tr>
<td>Public Adjuster</td>
<td>Optional</td>
<td>Y</td>
<td>Y ♦</td>
<td>Biennial</td>
<td>N</td>
<td>N</td>
<td>Resident or Nonresident</td>
<td>Individual or Firm</td>
<td>$54</td>
<td>$54</td>
<td>$69</td>
</tr>
<tr>
<td>Surplus Lines Producer</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Biennial</td>
<td>N</td>
<td>Y (RESIDENTS ONLY)</td>
<td>Resident or Nonresident</td>
<td>Individual or Firm</td>
<td>$200</td>
<td>$100</td>
<td>Based on expiration of producer license</td>
</tr>
<tr>
<td>TPA</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Biennial</td>
<td>6/30 - Odd Years Only</td>
<td>N</td>
<td>Resident or Nonresident</td>
<td>Firm Only</td>
<td>$250</td>
<td>$250</td>
<td>$65</td>
</tr>
<tr>
<td>Temporary Producer</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Resident Only</td>
<td>Individual Only</td>
<td>$27</td>
<td>$27</td>
<td>N/A</td>
</tr>
<tr>
<td>Death/Disability</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>NA</td>
<td>NA</td>
<td>N</td>
<td>Resident Only</td>
<td>Individual Only</td>
<td>$27</td>
<td>$27</td>
<td>N/A</td>
</tr>
</tbody>
</table>

▲ Required for individual licensees only.

■ Varies depending on exemptions or designations

♦ CEs required for resident and non-residents whose home state is not reciprocal with MD or state that does not issue a Public Adjuster license.

Note: The $15 fraud prevention fee has been incorporated into the renewal fee listed for Producers, Public Adjusters, Insurance Advisers, and Third Party Administrators.

Note: CONTINUING EDUCATION SERVICES
Prometric is MIA's vendor for continuing education services. For information regarding course offerings or to view your continuing education transcript, please visit Prometric's website, www.prometric.com, or contact Prometric at: 1-800-324-4592.
### The Maryland Insurance Administration

#### Line of Insurance Requirements for Producers

<table>
<thead>
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<th>Line of Insurance</th>
<th>Pre-licensing Education Required</th>
<th>Exam Required</th>
<th>CE Required</th>
<th>Applicant Type</th>
<th>Bond(s) Required</th>
<th>Line Category</th>
<th>Pre-Requisite Line(s)</th>
</tr>
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<tr>
<td><strong>Major Lines of Insurance</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Casualty</td>
<td>Y</td>
<td>Casualty</td>
<td>Y</td>
<td>Individual or Firm</td>
<td>N</td>
<td></td>
<td>N</td>
</tr>
<tr>
<td>Health</td>
<td>Y</td>
<td>Health</td>
<td>Y</td>
<td>Individual or Firm</td>
<td>N</td>
<td></td>
<td>N</td>
</tr>
<tr>
<td>Life</td>
<td>Y</td>
<td>Life</td>
<td>Y</td>
<td>Individual or Firm</td>
<td>N</td>
<td></td>
<td>N</td>
</tr>
<tr>
<td>Property</td>
<td>Y</td>
<td>Property</td>
<td>Y</td>
<td>Individual or Firm</td>
<td>N</td>
<td></td>
<td>N</td>
</tr>
<tr>
<td>Personal Lines</td>
<td>Y</td>
<td>Personal Lines</td>
<td>Y</td>
<td>Individual or Firm</td>
<td>N</td>
<td></td>
<td>N</td>
</tr>
<tr>
<td><strong>Limited Lines of Insurance</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Credit</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Individual or Firm</td>
<td>N</td>
<td>L&amp;H/P&amp;C</td>
<td>N</td>
</tr>
<tr>
<td>Title</td>
<td>Y ●</td>
<td>Title ●</td>
<td>Y ●</td>
<td>Individual or Firm</td>
<td>Y ●</td>
<td>P&amp;C</td>
<td>N</td>
</tr>
<tr>
<td>Travel</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Individual Only</td>
<td>N</td>
<td>P&amp;C</td>
<td>N</td>
</tr>
</tbody>
</table>

- Required for individual licensees only.
- Attorneys who are admitted to practice before the Maryland Court of Appeals do not have to fulfill Title examination, pre-licensing, or CE requirements.
- Attorneys who are admitted to practice before the Maryland Court of Appeals and who practice law at a Maryland law firm do not have to fulfill Title bond requirements; individuals who are associated with a Title firm which has both a Title fidelity and surety bond do not have to fulfill Title bond requirements because they are covered by their firm’s Title bonds.

**Note:** A law firm selling Title insurance does not have to be licensed, but the individual attorneys working at the law firm who are selling Title insurance must be licensed.
## The Maryland Insurance Administration
### Reinstatement License Fees

<table>
<thead>
<tr>
<th>License Type</th>
<th>Reinstatement Fee (July 1 - July 31)</th>
<th>Reinstatement Fee (August 1 - August 31)</th>
<th>Reinstatement Fee (September 1 - September 30)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insurance Adviser</td>
<td>$240</td>
<td>$265</td>
<td>$290</td>
</tr>
<tr>
<td>Public Adjuster</td>
<td>$165</td>
<td>$165</td>
<td>$165</td>
</tr>
<tr>
<td>TPA</td>
<td>$90</td>
<td>$115</td>
<td>$140</td>
</tr>
</tbody>
</table>

**Reinstatement Fee for License Types Listed Below (Valid up to 1 year after license expiration)**

<table>
<thead>
<tr>
<th>License Type</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Producer</td>
<td>$169</td>
</tr>
<tr>
<td>Surplus Lines</td>
<td>$300</td>
</tr>
</tbody>
</table>

The reinstatement license fee amount is determined by the postmark date on the application, not the date the license is issued.

**Note:** The $15 fraud prevention fee has been incorporated into the reinstatement fee listed for Producers, Public Adjusters, Insurance Advisers, and Third Party Administrators.
EXAMINATION SCHEDULING PROCEDURES

ELIGIBILITY AND FEES

The following fee table lists the applicable fee for each examination(s). The fee is for each registration, whether you are taking the examination(s) for the first time or repeating.

<table>
<thead>
<tr>
<th>Examination Fee</th>
<th>$70</th>
</tr>
</thead>
<tbody>
<tr>
<td>The fee is $70 for the 2 examination portions, regardless of whether you take 1 or both examination portions. Examination retakes are $70 for 1 or both examination portions. The examination fee is valid for six months.</td>
<td></td>
</tr>
</tbody>
</table>

NOTE: REGISTRATION FEES ARE NOT REFUNDABLE OR TRANSFERABLE

All eligibilities are valid for six (6) months from the date PSI receives your eligibility from the approved provider. If you do not pass the examination(s) within the six (6) month period, you must reapply with PSI, including retaking the Pre-licensing Education Courses.

Candidates are only required to retake the portion of the examination that was failed (state or general). The failed portion of the examination must be passed within six (6) months from the date PSI receives your eligibility from the approved provider. Within the six (6) month time period failed portions of the examination may be taken until passed.

You may take examinations on an unlimited basis. However a candidate who tests unsuccessfully must wait four (4) days before retaking the examination.

English as a Second Language (ESL) candidates must call PSI at (800) 733-9267 to schedule for their examination, if they wish to receive additional time. Please do not schedule online, as you will not receive the additional time.

INTERNET SCHEDULING

For the fastest and most convenient test scheduling process, PSI recommends that candidates register for their exams using the Internet. In order to register over the Internet, candidates will need to have a valid credit card (Visa, MasterCard, American Express or Discover). Candidates register online by accessing PSI’s registration website at www.psiexams.com. Internet registration is available 24 hours a day.

1. Log onto PSI’s website and create an account. Please enter your email address and first and last name. This information must match exactly with the information your educator has provided to PSI. Be sure to check the box next to “Check here to attempt to locate existing records for you in the system”

2. You will be asked to select the examination and enter your Social Security #. Your record will be found and you will now be ready to pay and schedule for the exam. Enter your zip code and a list of the testing sites closest to you will appear. Once you select the desired test site, available dates will appear. If you have problems contact PSI at (800) 733-9267 for help.

TELEPHONE SCHEDULING

For telephone registration, you will need a valid credit card (Visa, MasterCard, American Express or Discover).

Complete the Examination Registration Form, including your credit card number and expiration date, so that you will be prepared with all of the information needed to register by telephone.

PSI registrars are available at (800) 733-9267, Monday through Friday between 7:30 am and 10:00 pm, or Saturday and Sunday between 9:00 am and 5:30 pm, Eastern Time, to receive the information listed on your Examination Registration Form and to schedule your appointment for the examination.

CANCELING AN EXAMINATION APPOINTMENT

You may cancel and reschedule an examination appointment without forfeiting your fee if your cancellation notice is received 2 days before the scheduled examination date. For example, for a Monday appointment, the cancellation notice would need to be received on the previous Saturday. You may call PSI at (800) 733-9267.

Note: A voice mail or email message is not an acceptable form of cancellation. Please use the PSI Website or call PSI to speak directly to a Customer Service Representative.

SCHEDULING A RE-EXAMINATION

It is not possible to make a new examination appointment on the same day you have taken an examination; this is due to processing and reporting scores. A candidate who tests unsuccessfully on a Wednesday can call the next day to schedule the examination. In order to retest, you must re-register following the steps for registration and scheduling as outlined earlier. You may re-register over the Internet, telephone or by mail.

MISSED APPOINTMENT OR LATE CANCELLATION

Your registration will be invalid, you will not be able to take the examination as scheduled, and you will forfeit your examination fee, if you:

- Do not cancel your appointment 2 days before the schedule examination date;
- Do not appear for your examination appointment;
- Arrive after examination start time;
- Do not present proper identification when you arrive for the examination.

EXAM ACCOMMODATIONS

All examination centers are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990, and exam accommodations will be made in meeting a candidate’s needs. Applicants with disabilities or those who would otherwise have difficulty taking the examination must fill out the form at the end of this Candidate Information Bulletin and fax to PSI (702) 932-2666. This form also includes out-of-state testing requests.
WORD-TO-WORD TRANSLATION DICTIONARY

Candidates may request to use a Word-to-Word dictionary at no cost. The dictionary cannot contain pictures or definitions.

EXAMINATION SITE CLOSING FOR AN EMERGENCY

In the event that severe weather or another emergency forces the closure of an examination site on a scheduled examination date, your examination will be rescheduled. PSI personnel will attempt to contact you in this situation. However, you may check the status of your examination schedule by calling (800) 733-9267. Every effort will be made to reschedule your examination at a convenient time as soon as possible. You may also check our website at www.psiexams.com.

SOCIAL SECURITY NUMBER CONFIDENTIALITY

PSI will use your social security number only as an identification number in maintaining your records and reporting your examination scores to the state. A Federal law requires state agencies to collect and record the social security numbers of all licensees of the professions licensed by the state.

EXAMINATION SITE LOCATIONS

The following are the examination centers where you may take the Maryland Insurance Licensing Examination(s).

Baltimore Falls Road Center:
Mount Washington Area
6115 Falls Road, Suite 100
Baltimore, MD 21209

From the Beltway I-695, take I-83 South (Jones Falls Expressway) to the Northern Pkwy exit East. Turn left onto Northern Pkwy heading East. Turn left onto Fall Rd. Go about 1 mile. You will come to a Light Rail overpass/bridge. The 6115 Falls Rd.

Building is immediately on your right, on the other side of the overpass/bridge. When you turn in, you will drive past the “MAIN ENTRANCE” and turn right in the lot, proceeding to free parking available on the left side and rear side of the building. Please come back to the “MAIN ENTRANCE” and enter the building there (not the rear entrance). PSI is in Suite 100, the first suite door to your left. This site is also conveniently located adjacent to an MTA Light Rail Station, and accessible by MTA bus routes.

Note: Due to building management requests, please DO NOT DISTURB other business neighbors for directions to PSI’s office.

Crofton Center
Morauer III Building
2137 Espey Court, Suite 3
Crofton, MD 21114

From the Defense Highway 450, take the Priest Bridge Rd exit going South. Turn right on Espey Court.

From the Washington Beltway, take 50 East to 3 North. Turn right on Defense Highway 450, take the Priest Bridge Rd exit going South. Turn right on Espey Court.

College Park Center:
The Sterling Building
4920 Niagara Road, Suite 211
College Park, MD 20740

From I-95 North/Beltway, take Exit 25/Route 1 toward College Park. Continue straight across Route 1 onto Edgewood Road. Continue to the 4-way stop.

Turn left onto Rhode Island Avenue. Turn left at the next road - Niagara Road. The Sterling Building is on the right. Park in the appropriately marked spaces.

From I-95 South take Exit 25. Stay in the left turn lane and make a left at the next light which is Edgewood Road. Continue to the 4-way stop. Turn left onto Rhode Island Avenue. Turn left at the next road - Niagara Road. The Sterling Building is on the right. Park in the appropriately marked spaces.

Hagerstown Center:
140 West Franklin St, Suite A
Hagerstown, MD 21740

From I 70: Take exit 32B Hagerstown. This is US Route 40 west. Follow Route 40 for 4.1 miles to 140 W. Franklin St. It is slightly past the intersection of Jonathan and Franklin. You must turn into the church parking lot on the right before you reach 140 W. Franklin St. There are many parking spots reserved for PSI testing on that lot. You will then walk past the front of the church and into 140 W. Franklin St. Suite A is on the ground floor. No steps required to enter.

LaNah Center:
5900 Princess Garden Pkwy
Suite 501
LaNah, MD 20706
Take the 20B-A/Annapolis Road Exit towards Lanham. Take Princess Garden Parkway exit. Turn left, following Princess Garden Parkway exit, veer into far right lane. Turn right on Princess Garden Parkway - turn left at first driveway.

Salisbury Center:
1323 Mt. Hermon Road
Beaglin Park Plaza, Suite 2A
Salisbury, MD 21804

From Rt 50 E, take 50 Business thru Salisbury. Turn right onto Beaglin Park Dr. Turn left onto Mt Hermon Rd. Take the first left into Beaglin Park Plaza Complex. Look for Building 2.

From Rt 13S, take 13 S Norfolk exit. Take 50 Business exit and turn left onto Beaglin Park Dr. Turn left onto Mt Hermon Rd. Take the first left into Beaglin Park Plaza Complex. Look for Building 2.

From Rt 13N, take Rt 50/Salisbury Business exit. Turn left onto Beaglin Park Dr. Turn left onto Mt Hermon Rd. Take the first left into Beaglin Park Plaza Complex. Look for Building 2.

Additionally, PSI has examination centers in many other regions across the United States. You may take this examination at any of these locations. Once you have paid for the examination, enter your zip code and a list of the testing sites closest to you will appear.

REPORTING TO THE EXAMINATION SITE

On the day of the examination, you should arrive 30 minutes before your appointment. This extra time is for sign-in, identification, and familiarizing you with the examination process. If you arrive late, you may not be admitted to the examination site and you will forfeit your examination registration fee.

REQUIRED IDENTIFICATION AT EXAMINATION SITE

You must provide 2 forms of identification. One must be a VALID form of government issued identification (driver’s license, state ID, passport), which bears your signature and has your photograph. The second ID must have your signature and preprinted legal name. All identification provided must match the name on the Examination Registration Form and your Registration Confirmation Notice.
If you cannot provide the required identification, you must call (800) 733-9267 at least 3 weeks prior to your scheduled appointment to arrange a way to meet this security requirement.

SECURITY PROCEDURES

The following security procedures will apply during the examination:

- Only non-programmable calculators that are silent, battery-operated, do not have paper tape printing capabilities, and do not have a keyboard containing the alphabet will be allowed in the examination site.
- Candidates may take only approved items into the examination room.
- All personal belongings of candidates, with the exception of close-fitting jackets or sweatshirts, should be placed in the secure storage provided at each site prior to entering the examination room. Personal belongings include, but are not limited to, the following items:
  - Electronic devices of any type, including cellular / mobile phones, recording devices, electronic watches, cameras, pagers, laptop computers, tablet computers (e.g., iPads), music players (e.g., iPods), smart watches, radios, or electronic games.
  - Bulky or loose clothing or coats that could be used to conceal recording devices or notes, including coats, shawls, hooded clothing, heavy jackets, or overcoats.
  - Hats or headgear not worn for religious reasons or as religious apparel, including hats, baseball caps, or visors.
  - Other personal items, including purses, notebooks, reference or reading material, briefcases, backpacks, wallets, pens, pencils, other writing devices, food, drinks, and good luck items.
- Person(s) accompanying an examination candidate may not wait in the examination center, inside the building or on the building's property. This applies to guests of any nature, including drivers, children, friends, family, colleagues or instructors.
- No smoking, eating, or drinking is allowed in the examination center.
- During the check in process, all candidates will be asked if they possess any prohibited items. Candidates may also be asked to empty their pockets and turn them out for the proctor to ensure they are empty. The proctor may also ask candidates to lift up the ends of their sleeves and the bottoms of their pant legs to ensure that notes or recording devices are not being hidden there.
- Proctors will also carefully inspect eyeglass frames, tie tacks, or any other apparel that could be used to harbor a recording device. Proctors will ask to inspect any such items in candidates' pockets.
- If prohibited items are found during check-in, candidates shall put them in the provided secure storage or return these items to their vehicle. PSI will not be responsible for the security of any personal belongings or prohibited items.
- Any candidate possessing prohibited items in the examination room shall immediately have his or her test results invalidated, and PSI shall notify the examination sponsor of the occurrence.
- Any candidate seen giving or receiving assistance on an examination, found with unauthorized materials, or who violates any security regulations will be asked to surrender all examination materials and to leave the examination center. All such instances will be reported to the examination sponsor.
- Copying or communicating examination content is violation of a candidate’s contract with PSI, and federal and state law. Either may result in the disqualification of examination results and may lead to legal action.
- Once candidates have been seated and the examination begins, they may leave the examination room only to use the restroom, and only after obtaining permission from the proctor. Candidate will not receive extra time to complete the examination.

TAKING THE EXAMINATION BY COMPUTER

The examination will be administered via computer. You will be using a mouse and computer keyboard.

IDENTIFICATION SCREEN

You will be directed to a semiprivate testing station to take the examination. When you are seated at the testing station, you will be prompted to confirm your name, identification number, and the examination for which you are registered.

TUTORIAL

Before you start your examination, an introductory tutorial is provided on the computer screen. The time you spend on this tutorial, up to 15 minutes, DOES NOT count as part of your examination time. Sample questions are included following the tutorial so that you may practice answering questions, and reviewing your answers.

TEST QUESTION SCREEN

The “function bar” at the top of the test question provides mouse-click access to the features available while taking the examination.

One question appears on the screen at a time. During the examination, minutes remaining will be displayed at the top of the screen and updated as you record your answers.

IMPORTANT: After you have entered your responses, you will later be able to return to any question(s) and change your response, provided the examination time has not run out.

EXPERIMENTAL QUESTIONS

In addition to the number of questions per examination, a small number of three to ten “experimental” questions may be administered to candidates during the examinations.
These questions will NOT be scored and time to answer them has been added to the time allowed. The administration of such non-scored experimental questions is an essential step in developing future licensing examinations.

EXAMINATION REVIEW

PSI, in cooperation with the Maryland Insurance Administration, will be consistently evaluating the examinations being administered to ensure that the examinations accurately measure competency in the required knowledge areas. While taking the examination, examinees will have the opportunity to provide comments on any questions. Comments may be entered by clicking the Comments link on the function bar of the test question screen.

These comments will be analyzed by PSI examination development staff. PSI does not respond to individuals regarding these comments, all substantive comments are reviewed. This is the only review of examination materials available to candidates.

SCORE REPORTING

Your score will be given to you immediately following completion of the examination. The following summary describes the score reporting process:

- **On paper** - an official score report will be printed at the examination site.
  - If you **pass**, you will immediately receive a passing score report.
  - If you **do not pass**, you will receive a failing score report with a diagnostic report indicating your strengths and weaknesses by examination type.

Candidates are only required to retake the portion of the examination that was failed (state or general). The failed portion of the examination must be passed within six (6) months from the date the previously passed portion of the examination was taken. Within a six (6) month time period failed portions of the examination may be taken until passed.

DUPLICATE SCORE REPORTS

You may request a duplicate score report after your examination by emailing scorereport@psionline.com or by calling 800-733-9267.

EXAMINATION SCORES AND LICENSE APPLICATION

You must apply for a license within 6 months of successfully completing the examination.

TIPS FOR PREPARING FOR YOUR LICENSE EXAMINATION

The following suggestions will help you prepare for your examination.

- Planned preparation increases your likelihood of passing.
- Start with a current copy of this Candidate Information Bulletin and use the examination content outline as the basis of your study.
- Read study materials that cover all the topics in the content outline.
- Take notes on what you study. Putting information in writing helps you commit it to memory and it is also an excellent business practice. Underline or highlight key ideas that will help with a later review.
- Discuss new terms or concepts as frequently as you can with colleagues. This will test your understanding and reinforce ideas.
- Your studies will be most effective if you study frequently, for periods of about 45 to 60 minutes. Concentration tends to wander when you study for longer periods of time.

Many of the reference materials are available for purchase at www.psionlinestore.com or by calling the PSI Online Store, toll-free, at (866) 589-3088.

Titles currently in stock are listed on the order form near the end of this candidate information bulletin.

EXAMINATION CONTENT OUTLINES

Individual examination content outlines are available from PSI for each examination. Content outlines indicate the examination time limit, minimum score required to pass, subject area and the number of items in each area. To obtain a content outline for your specific examination, visit www.psioxems.com, select Government/State Licensing Agencies/Maryland/MD Insurance. The examination content outlines can be found under Information Links (on the right side of the page).
Maryland Insurance Examination Registration Form

Read the Candidate Information Bulletin before filling out this registration form. You must provide all information requested and submit the appropriate fee. PLEASE TYPE OR PRINT LEGIBLY. Registration forms that are incomplete, illegible, or not accompanied by the proper fee will be returned unprocessed. Registration fees are not refundable or transferable.

1. Legal Name: ___________________________ ___________________________ ___________________________
   Last Name       First Name       Middle Name

2. Social Security: _______ - _______ - _______ (FOR IDENTIFICATION PURPOSES ONLY)

3. Date of Birth: _______ - _______ - _______  Month    Date    Year

4. School Code: _______ (See listing on page 13)

5. Mailing Address: ___________________________ ___________________________ ___________________________
   Number, Street (Must be a physical address, PO Boxes are NOT accepted)       Apt/Ste
   City                                State       Zip Code

6. Telephone: Home _______ _______ _______ Office _______ _______ _______

7. Email: ___________________________ ___________________________ ___________________________

8. Examination: (You may only take one examination at a time; please check one)

   - Life General and State ($70)
   - Accident & Health General and State ($70)
   - Life General Only ($70)
   - Accident & Health General Only ($70)
   - Life, Accident & Health Combo General and State ($70)
   - Life, Accident & Health Combo General Only ($70)
   - Property General and State ($70)
   - Property General Only ($70)
   - Casualty General and State ($70)
   - Casualty General Only ($70)
   - Property & Casualty Combo General and State ($70)
   - Property & Casualty Combo General Only ($70)
   - Title General and State ($70)
   - Title General Only ($70)
   - Public Adjuster General and State ($70)
   - Public Adjuster General Only ($70)
   - Personal Lines General and State ($70)
   - Personal Lines General Only ($70)
   - Adviser’s Life & Health General and State ($70)
   - Adviser’s Property & Casualty State Only ($70)
   - Adviser’s Life & Health General Only ($70)
   - Adviser’s Property & Casualty General Only ($70)
   - Adviser’s Life & Health State Only ($70)
   - Adviser’s Property & Casualty General and State ($70)
   - Title General and State Only ($70)
   - Title State Only ($70)
   - Public Adjuster State Only ($70)
   - Personal Lines State Only ($70)
   - SHOP Exchange Navigator ($70)

9. Examination: (Check one)  

   - FIRST TIME
   - RETAKE

BE SURE TO SIGN THE FOLLOWING PAGE
The following sections 10-15 are optional. You will not be penalized for declining. However, we encourage the applicants for the Life Only exam, the Accident & Health Only exam, and the Life, Accident & Health combination exam to respond to participate so that the Insurance Administration can be in compliance with Section 10-109 (e) of the Insurance Article.

10. Gender
- I decline to participate
- Female
- Male
- Unspecified

11. Race
- I decline to participate
- American Indian and Alaska Native
- Asian
- Black or African American
- Native Hawaiian and Other Pacific Islander
- White
- Two or more races
- Unspecified

12. Education Level
- I decline to participate
- High School or GED
- Some College
- 2-Year College Degree (Associates)
- 4-Year College Degree (BA,BS)
- Master's Degree
- Doctoral Degree
- Unspecified

13. Age Group
- I decline to participate
- Under 18
- 18-24
- 25-29
- 30-34
- 35-39
- 40-44
- 45-49
- 50-54
- 55-59
- 60-64
- 65 and over
- Unspecified

14. Ethnicity
- I decline to participate
- American/Canadian
- Chinese
- Cuban
- Dutch
- English
- Filipino
- French
- German
- Irish
- Italian
- Japanese
- Korean
- Other Asian
- Other European
- Other Hispanic or Latino
- Puerto Rican
- Russian
- Scottish
- Swedish
- Vietnamese
- Unspecified

15. Native Language
- I decline to participate
- Arabic
- Chinese
- English
- French
- German
- Italian
- Korean
- Polish
- Russian
- Spanish
- Tagalog
- Vietnamese
- Unspecified

16. Total Fees Included: $_________. You may pay by credit card, money order, company check, or cashier’s check. Make your money order or check payable to PSI and write your social security number on it). Cash and personal checks are not accepted.

If paying by credit card, check one: ☐ VISA  ☐ MasterCard  ☐ American Express  ☐ Discover

Card Number:__________________________________________  Exp. Date: ________________________________

Card Verification No:__________

The card verification number may be located on the back of the card (the last three digits on the signature strip) or on the front of the card (the four digits to the right and above the card account number).

Billing Street Address: _________________________________________________________ Billing Zip Code: __________________

Cardholder Name (Print):__________________________________  Signature:______________________________

17. I am submitting the Exam Accommodations Request (at the end of this bulletin) and required documentation.  ☐ Yes  ☐ No

18. Affidavit: I certify that the information provided on this registration form (and/or telephonically to PSI) is correct. I understand that any falsification of information may result in denial of licensure. I have read and understand the examination information bulletin.

Signature:__________________________________________  Date:______________________________

If you are registering by mail or fax, sign and date this registration form on the lines provided.

Complete and forward this registration form with the applicable examination fee to:

PSI licensure:certification * ATTN: Examination Registration MD INS
3210 E Tropicana * Las Vegas, NV * 89121
Fax (702) 932-2666 * (800) 733-9267 * TTY (800) 735-2929
www.psiexams.com
### Maryland Approved Pre-Licensing Schools

#### For Life & Health
- **15695** 1st ASAP Insurance School
- **11675** A.A. Coleman & Robinson National Training Center
- **15688** AAOnlineclasses.com
- **14885** A.A. Frazier and Associates - The Frazier Institute
- **11173** A.D. Banker & Company, LLC
- **15274** A+ Life & Health Training
- **15681** CAPE Education, Inc.
- **15714** Care Givers Insurance Agency, LLC
- **15676** Combined Insurance Company of America (Accident & Health only)
- **15673** Complete Benefit Solutions, Inc.
- **15709** CPMI Professional Development Inc
- **15672** Delmarva Insurance Training School
- **14778** Enterprise Training School, Inc.
- **15352** ExamFX, Inc.
- **15059** Greater Baltimore Property & Casualty Educational Center
- **15210** Greater Washington Foundation of Insurance and Financial Advisors Formerly DC Life Underwriters Foundation, Inc.
- **14788** Harford Continuing Education Group
- **10199** Kaplan Financial
- **15064** Montgomery College
- **15707** National Online Insurance School
- **14215** Online Training Institute
- **10080** Primerica Life Insurance Company
- **15678** Scott C. Iodice & Associates w/ Northwestern Mutual
- **15675** The Training Exchange, Inc.
- **15697** Xcel Solutions LLC

#### For Property & Casualty
- **15695** 1st ASAP Insurance School
- **11675** A.A. Coleman & Robinson National Training Center
- **11173** A.D. Banker & Company, LLC
- **15688** AAOnlineclasses.com
- **15610** A.D. Lowinger & Associates
- **14746** Anne Arundel Community College
- **15681** CAPE Education, Inc.
- **15714** Care Givers Insurance Agency, LLC
- **15709** CPMI Professional Development Inc
- **15672** Delmarva Insurance Training School
- **14778** Enterprise Training School, Inc.
- **15352** ExamFX, Inc.
- **15059** Greater Baltimore Property & Casualty Educational Center
- **14788** Harford Continuing Education Group
- **14791** Independent Insurance Agents of Maryland
- **12710** Insurance Agents & Brokers
- **15712** Insurnace Schools Inc
- **10199** Kaplan Financial
- **15064** Montgomery College
- **15711** Premier Insurance School
- **14835** RTB Insurance Education
- **15693** Specialty Career Training, Inc.
- **15705** Testeachers
- **15694** The License Coach
- **15716** The Brownstone Training Academy
- **15692** Walter A Crowther Ins Agy, Inc.
- **15700** WebCE
- **14859** WOR-WIC Community College

#### For Title
- **15715** Academy of Maryland Title Insurance
- **15681** CAPE Education, Inc.
- **14778** Enterprise Training School, Inc.
- **12099** Maryland Land Title Association
- **15064** Montgomery College
- **15675** The Training Exchange, Inc.
- **15696** TitleTrainer, LLC
- **15713** Trusted Agent Services Group
Name of Applicant: _________________________________________________________ Date of Birth: _________________________________

Social Security #: ____________________     Email Address: ____________________________________________________________________

Address: ______________________________________________________________________________________________________________

City: ________________________________   State: _____ _________   Zip:  ___________ Phone: __________________________

Type of Education Waiver requested (check one):

□ Maintain approved insurance designation in good standing. Provide letter of good standing issued by the organization conferring the designation. (See MIA website for listing of approved designations - www.mdinsurance.state.md.us)

□ Equivalent college courses taken. Attach transcript of insurance course(s) showing college credits and official course description(s) from college catalog.

Reason for requested education waiver (check one):

Type of Affidavit of Employer requested (check one):

Work experience can be substituted for course work in the lines of insurance for which the applicant will be testing (Reference: §10-104 and §10-105 of the Insurance Article, Annotated Code of Maryland.) The work experience must be with one of the following types of employers: Maryland Insurance Administration, Insurance Company, Insurance Producer (or Firm). The period of work experience must be one year within the past 3 calendar years. In order to meet the one-year requirement, more than one employer may need to complete an Affidavit. The completed Affidavits must be sent to and approved by the Maryland Insurance Administration before taking the examination. (This form may be photocopied.)

Under the provisions of the Maryland Insurance laws, and in support of an application for an insurance license examination I hereby declare the Applicant has been regularly employed by:

Name of Employer: ________________________________________ Signature of Employer Representative: ________________________ Title: _______________

Address: _________________________________________________

Type of Employer (check one): Insurance Company ______ Insurance Producer or Firm ______ For period(s): From_____________ To: ________________

Work Hours: Full Time (40+Hours) _________ Part-Time (Less than 40 Hours) _______ Please indicate hours per week______

Please select and attach a description of the duties the employee has been responsible for in the lines of insurance listed below. A “Responsible Duty” is a duty that would result in the applicant becoming reasonably familiar with the basic policy forms, fundamental procedures and practices for the line(s) of insurance for which the applicant is applying.

<table>
<thead>
<tr>
<th>Life Insurance</th>
<th>Property Insurance</th>
<th>Automobile Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Insurance</td>
<td>Casualty Insurance</td>
<td>Other: ________________</td>
</tr>
</tbody>
</table>

Please attach a description of the duties the employee has been responsible for in the categories of Title Insurance Experience listed below. Your employee should have experience in at least three of these categories.

<table>
<thead>
<tr>
<th>Title Search &amp; Abstract Review</th>
<th>Preparation &amp; Review of Commitments / Policies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examination of Title</td>
<td>Settlement Accounting Procedures</td>
</tr>
</tbody>
</table>

Name of Producer or Insurer: _________________________ Telephone Number: _________________________ Date: _________________________

State of__________________________________________________ City/ County of ______________________________________________

On this _____ day of ________, _______, personally appeared before me the said named _______________________________

known to me to be the person described in and who executed the foregoing instrument, and he/she acknowledge the same and, being duly sworn by me, made oath that the statements in the application are true.

____________________________________________
Notary Public

My commission expires: _________________________________
To place an order for one or more of the following items listed, you may:

- Order online at www.psionlinestore.com
- Call the PSI Online store toll-free at (866) 589-3088

Note: prices are available online at www.psionlinestore.com

<table>
<thead>
<tr>
<th>Item</th>
<th>Edition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life &amp; Health Pathfinder</td>
<td>Cummings, Spears, Pathfinder Pub</td>
</tr>
<tr>
<td>Property &amp; Casualty Pathfinder</td>
<td>Cummings, Pathfinder Pub</td>
</tr>
<tr>
<td>Property and Liability Insurance Principles</td>
<td>Insurance Institute of America</td>
</tr>
<tr>
<td>Dictionary of Insurance Terms</td>
<td>2000, 4th Ed, Harvey W. Rubin,</td>
</tr>
<tr>
<td>and Commercial Practices</td>
<td></td>
</tr>
</tbody>
</table>

Please note: Inventory and pricing subject to change without notice.
All examination centers are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990. Applicants with disabilities or those who would otherwise have difficulty taking the examination may request exam accommodations.

Candidates who wish to request exam accommodations because of a disability should fax this form and supporting documentation to PSI at (702) 932-2666.

Requirements for exam accommodations requests

You are required to submit documentation from the medical authority or learning institution that rendered a diagnosis. Verification must be submitted to PSI on the letterhead stationery of the authority or specialist and include the following:

- Description of the disability and limitations related to testing
- Recommended accommodation/modification
- Name, title and telephone number of the medical authority or specialist
- Original signature of the medical authority or specialist

Date: ________________________________________ SS#: ________________________________________

Legal Name: ____________________________________________

Last Name
First Name

Address: ______________________________________________

Street
City, State, Zip Code

Telephone: (_______) _______ - _______ (_______) _______ - _______

Home
Work

Email Address: __________________________________________

Check any exam accommodations you require (requests must concur with documentation submitted):

☐ Reader (as accommodation for visual impairment or learning disability)

☐ Extended time
(Additional time requested:___________)

☐ Large-print written examination

☐ Other__________________________________________

Complete and fax this form, along with supporting documentation, to (702) 932-2666 or email it to examaccommodations@psionline.com.

After 4 days, PSI Exam Accommodations will email you confirmation of approval with instructions for the next step.

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