



## Checklist for Entity or Individual Third-Party Administrator

### License Surrender

- **TPA Surrender Form** – Complete and sign the surrender form
- **Explanation Letter** – A cover letter on company letterhead stating why the TPA is surrendering its license and what happened to any insurer or fund contracts the TPA may have been administering. Please include the name, OK license number, phone number and address of the company taking over any insurer or fund contracts from the surrendering TPA.
- **Most Recent Yearly TPA Annual Report or Wavier** – contact me for the annual report year that will be required.

Email ([jeanette.pearce@oid.ok.gov](mailto:jeanette.pearce@oid.ok.gov)) or Mail all documentation to:

Oklahoma Insurance Department  
Regulated Industry Services Division  
400 NE 50<sup>th</sup> St.  
Oklahoma City, OK 73105

Questions may be directed to Jeanette Pearce, 405-521-6651 or [jeanette.pearce@oid.ok.gov](mailto:jeanette.pearce@oid.ok.gov).

Date: \_\_\_\_\_

# Oklahoma TPA License Surrender Form

Rev. 04/2020

To: **OKLAHOMA INSURANCE DEPARTMENT  
ATTN: REGULATED INDUSTRY SVCS DIV  
400 NE 50<sup>th</sup> St.  
OKLAHOMA CITY, OK 73105**

**LICENSEE MUST READ THIS STATEMENT:**

The official paper license (or a PDF copy) must be surrendered along with written and signed notice, requesting cancellation of the license by the licensee. TPA license surrender must be signed by an owner, officer or partner of the TPA. In cases where the license is not available, lost or misplaced, please indicate "license lost" or "license misplaced" on the request for license cancellation. In case of an individual licensed TPA's death, official notice posted in the newspaper, a program from the funeral, or a copy of the death certificate must accompany the request for license cancellation.

***I have read and understand the above statements. I Voluntarily Surrender my Oklahoma TPA license without threat or duress.***

TPA Licensee Name as Shown on the Oklahoma License: **Required, please type or print clearly.**

TPA Licensee Signature and Title if Third Party Administrator Entity Licensee: **Required**

<b>Check One Required</b>	
<input type="checkbox"/>	I am Voluntarily Surrendering my Oklahoma TPA individual license as it is no longer required per Title O.S. 36 § 1450(C)
<input type="checkbox"/>	I am Voluntarily Surrendering my Oklahoma TPA individual license # _____
<input type="checkbox"/>	I am Retiring and Voluntarily Surrendering my Oklahoma individual TPA license # _____
<input type="checkbox"/>	I have moved out of Oklahoma and I am Voluntarily Surrendering my Oklahoma TPA license # _____
<input type="checkbox"/>	I do not wish to renew my Oklahoma individual TPA license # _____
<input type="checkbox"/>	I am advising the Oklahoma Insurance Department of the death of an individual Oklahoma TPA licensee.
<input type="checkbox"/>	I am Voluntarily Surrendering my Oklahoma TPA entity license _____
<input type="checkbox"/>	I am selling or closing my business and Voluntarily Surrendering my OK TPA license # _____
<input type="checkbox"/>	I do not wish to renew my Oklahoma entity TPA license # _____
<input type="checkbox"/>	The TPA business entity changed FEIN and I am Surrendering Oklahoma license # _____

<b>Check One Required</b>	
<input type="checkbox"/>	My original Oklahoma paper license is attached to this letter.
<input type="checkbox"/>	My original Oklahoma paper license has been lost or misplaced.
<input type="checkbox"/>	I have included official notice posted in the newspaper, a program from the funeral, or a copy of the death certificate for the Oklahoma licensee.

Licensee address, city, state, zip, and contact phone number: **Please type or print clearly.**

**Please contact the Oklahoma Insurance Department at 405-521-6651 if you have questions or concerns.**