



STATE OF CONNECTICUT

INSURANCE DEPARTMENT

Rental Car Agency Permit

Part II Application

Instructions:

1. Complete Application: incomplete applications will be returned. Sign and date application.
2. Forward the appointment application(s) to the Insurance Company(ies) for which you will be transacting business.
3. The Insurance Company must complete the Rental Car Agency Company Appointment Application and return the form to **you**. The Insurance Company emails or faxes the completed form to you.
4. Attach the completed Rental Car Agency Company Appointment Application to this application.
5. Attach Rental Car Agency Permit Part II Application and the Rental Car Agency Company Appointment Application to the [NIPR warehouse](#).

(Please Print Clearly or Type)

1. Rental Car Agency Name:

2. Mailing Address (*Address, City, State and Zip Code*):

3. Physical Address (*This address cannot be a PO Box*):

4. Phone Number:

5. Email:

6. Federal Tax-Id Number:

7. List of ALL business locations of the applicant pertinent to this application:

If you need additional space, attach additional sheets of paper to the application

8. Has a training program been implemented for employees involved in the marketing of insurance to renters, in accordance with the requirements of Connecticut Regulation 38a-799-5?

Yes

No

9. Please let the authorized insurance companies which the applicant will represent:

If you need additional space, attach additional sheets of paper to the application

As an officer, partner, owner or principal of the applicant, I acknowledge that the information contained herein is true and complete to the best of my knowledge and belief, and I hereby agree to comply with the requirements set forth in C.G.S. 38a-799.

Print or Type Applicant Signature and Title

Signature/Date of Authorized Applicant