

STATE OF ALABAMA **PR**
DEPARTMENT OF INSURANCE
ANNUAL AUDIT AND EXAMINATION FEE TRANSMITTAL FORM

INSTRUCTIONS

All Companies licensed in the State of Alabama must pay the ANNUAL AUDIT AND EXAMINATION FEE of \$850.00. The only exceptions are Mutual Aid Associations, Fraternal Benefits societies, and HMOs. The Fee for Mutual Aids and Fraternal is \$225 and the fee for HMOs is \$300. Surplus line insurers doing business in Alabama must pay the Annual Audit and Examination Fee of \$850.

- () Make checks payable to the: Alabama Department of Insurance (the Department does not have an EFT account at this time)
- () Please make note: this P.O. Box number is different from the Premium Tax P. O. Box number,
- () Mail this form, and check to:

POSTAL SERVICE

Alabama Department of Insurance
c/o Compass Bank
P.O. Box 830707
Birmingham, AL 35283-0707

COURIER OR EXPRESS SERVICE

Alabama Department of Insurance
c/o Compass Bank
701 South 32nd Street
Birmingham, AL 35233

NAIC NUMBER#:

COMPANY NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

CONTACT PERSON _____

TELEPHONE _____

E-MAIL ADDRESS _____

1. ANNUAL FEE (Due March 1st of each year)

PR: \$

Check Number

**IF THE ABOVE CHECK INCLUDES PAYMENTS FOR MORE THAN ONE COMPANY
LIST ADDITIONAL COMPANIES ON THE REVERSE SIDE.**

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	<u>COMPANY NAME</u>	<u>NAIC #:</u>
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