Online Inactive Certificate Holder and Branch Registrant Annual Report

STEP BY STEP INSTRUCTIONS FOR THE ONLINE REPORT
Online Submission Overview

- Go to ALDOI.gov.
- Click “Preneed” under Quick Links.
- Under Preneed Links click on “Online Reporting”.
- Enter your COA # in the Company # spot and enter your password then click submit.
- If you do not have a COA# enter your Company # in the Company # spot and enter your password then click submit.
- If you have forgotten your Company # or Password, please call Preneed at 334-240-4420.
- Complete the online form.
- Then upload the statements either by Fax, Email or Document Upload.
Preparation

- The Inactive Report is for the reporting of Post Law Contracts only (contracts written after May 1, 2002).

- Gather all statements from your insurer(s); you will need to provide these statements to the department along with the filing – **The Company reporting is responsible for submitting the statements not the trustee or insurer(s)** – NOTE: Your filing is not complete until the Department is in receipt of the statements.

- You will need your log to complete the filing.

- Have the previous Inactive report handy for reference.

- If you have Branches you will also need to complete an inactive Branch Report.

- You will need your COA #, Branch PN # (if applicable) or your Company # and your password to access the online portal.

- The report along with the statements must be submitted either by Email, Fax or Document Upload.
Getting Started

Upon clicking the link for ALDOI-Preneed Online, you will see this screen. You must enter your Company #, or your Inactive Certificate of Authority Number and your password provided to you by the Department.

If you have forgotten your password, contact the Preneed Division: (334)240-4420
Preneed Reporting On Line Access

➢ Click on:
➢ Annual Inactive Reporting Information
➢ or
➢ Annual Inactive Branch Reporting Information
➢ This will bring you to the correct report
Certificate of Authority Reporting Screen

- Be sure all company information is correct
- Reporting year: The report should default to the correct year – confirm the reporting year is correct
Trust Funding Record(s)

Adding a Trust Record:

1. You will add a separate trust record for each trust account.

2. **Select Trustee**: Use the dropdown arrow to find and select the trustee if the trustee is not listed select “other”.

3. Add “Beginning Value”: Dollar amount of the trust at the beginning of the reporting period.

4. Add “Ending Value”: Dollar amount of the trust at the end of the reporting period.

5. “Change in Value”: Value will be automatically calculated.

6. “Deposits”: Total dollar amount of preneed funds collected and deposited into trust during the reporting period.

7. “Withdrawals”: Total dollar amount withdrawn from the trust(s) upon fulfillment of preneed contracts during the reporting period.

8. “Beginning Contracts”: Number of contracts at the beginning of the reporting period and should be the same as the ending number of contracts from the previous period.

9. “Written”: Number of preneed contracts written since the last reporting period.

10. “Cancelled”: Any contracts cancelled since the last reporting period – includes transferred contracts.

11. “Fulfilled”: Any contracts fulfilled since the last reporting period.


13. You must click “save trust record” for the record you have just entered before adding a new trust record or going to the next funding method.
Insurance Record(s)

The insurance record is for the recording of insurance funded post-law preneed contracts

**DO NOT** include insurance purchased by a trust

If the insurance is purchased by a trust, then this information will be on the trustee record and should be reported under “Trust Record(s)”

**Please note:** Several insurance companies list policies instead of insured lives. An insured life equals one preneed contract

1. **Select Insurer:** Use the dropdown arrow to find and select the insurer for the funding record. Select “Pre-owned Insurance” as the insurer for any contracts in which the preneed contract purchaser has provided an assignment to an insurance policy to cover the full amount of the preneed contract

2. **Face Value:** The amount of insurance being purchased to fund the contract. If the insurance has a graded or limited death benefit, then the ultimate value should be recorded.

3. **Previous Contracts:** Numbers of contracts at the beginning of the reporting period; this should be the same as the Outstanding Contracts from the previous reporting period

4. **Written:** Number of contracts written (in-force) with this insurer since the last reporting period

5. **Cancelled:** Number of contracts funded with this insurer that have been cancelled since the last reporting period (i.e. lapsed, cancelled, terminated, no longer in-force) but not paid out to the Certificate Holder

6. **Fulfilled:** Number of contracts funded with this insurer that have been fulfilled since the last reporting period

7. **Outstanding Contracts:** Number of contracts funded with this insurer, which remain outstanding/in-force at the end of this reporting period. Ending contracts should correlate to your preneed contract log

8. **You must save the record you have completed before adding a new Insurance record or going to the next funding method**
LOC (Letter of Credit) Record

- **Select Bank**: Use the dropdown arrow to find and select the trustee for the funding record.
- **LOC Number**: Enter the LOC Number as it appears on the letter of credit.
- **Amount of LOC**: Amount of the Letter of Credit.
- **Outstanding Liability**: Original retail amount of services and cash advances and the actual cost to the entity to provide the undelivered merchandise for all preneed contracts funded by the letter of credit as of the end of the reporting period.
- **Previous Contracts**: Numbers of contracts at the beginning of the reporting period; this should be the same as the outstanding Contracts from the previous reporting period.
- **Written**: Number of contracts which were written and covered by the Letter of Credit since the last reporting period. The contracts should be included in the Outstanding Liability.
- **Cancelled**: Number of contracts which were originally covered by the Letter of Credit, but which have cancelled since the last reporting period.
- **Fulfilled**: Number of contracts which were originally covered by the Letter of Credit, but which have been fulfilled since the last reporting period.
1. **Select Insurer**: Use the dropdown arrow to find and select the insurer for the funding record.

2. **Bond Number**: Enter the Bond Number as it appears on the Surety Bond.

3. **Amount of Surety Bond**: Dollar amount of the Surety Bond.

4. **Outstanding Liability**: Original retail amount of services and cash advances and the actual cost to the entity to provide the undelivered merchandise for all preneed contracts funded by the Surety Bond as of the end of the reporting period.

5. **Previous Contracts**: Numbers of contracts at the beginning of the reporting period; this should be the same as Outstanding Contracts from the previous reporting period.

6. **Written**: Number of contracts which were written and covered by the Surety Bond since the last reporting period. The contracts should be included in the Outstanding Liability.

7. **Cancelled**: Number of contracts originally covered by the Surety Bond, but which have cancelled since the last reporting period.

8. **Fulfilled**: Number of contracts originally covered by the Surety Bond, but which have been fulfilled since the last reporting period.

9. **Outstanding Contracts**: Total number of contracts covered by the Surety Bond.

10. You must “save” the record you have completed before adding a new bond record or going to the next funding method.
**Totals**

You should obtain the following information from your preneed contract log

- **Total contracts outstanding per preneed log**: Your preneed log should be up to date through the end of the reporting period. Enter the number of contracts that are shown as outstanding on your preneed contract log. Please be advised that we may request your log to confirm the numbers reported.

- **Total net sales of all outstanding preneed contracts per your log**: This is the net sales amount of all outstanding post-law preneed contracts according to your log.

- **Net Sales**: is the total retail value of all outstanding post-law preneed contracts, regardless of funding method or whether paid-in-full, less any discounts or credit for insurance applied to the contract.

### Preneed Contract Log

<table>
<thead>
<tr>
<th>Contract Number</th>
<th>Date of Contract</th>
<th>Purchaser</th>
<th>Net Amount of Contract</th>
<th>PIF / Instl</th>
<th>Amount Collected to Date</th>
<th>Date of Last Payment</th>
<th>Amount Trusted to Date</th>
<th>Date of Last Trust Deposit</th>
<th>PIF Date</th>
<th>Face Amount of Life Insurance Sold</th>
<th>Ultimate Value of Annuity</th>
<th>Partial Delivery YES / NO</th>
<th>Date of Partial Delivery</th>
<th>Date Contract Fulfilled</th>
<th>Date Contract Voided or Cancelled</th>
<th>Date of Refund</th>
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Columns are numbered for instructional purposes only.
E-Signature

This is the final Step before submission. It should be completed by the representative submitting the report. The 4-digit e-Signature is a number of the submitting representative’s choosing.

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**E-Signature**

I, as the certificate holder or the representative authorized to sign on behalf of the certificate holder, certify that the above information is true and correct to the best of my knowledge and belief. I certify that I have complied with all of the requirements of Chapter 27-17A, Code of Alabama, 1975. I understand that any person who knowingly presents false or fraudulent information to the Commissioner of Insurance or his representative, willfully fails to timely make deposits to trust, or knowingly withdraws unauthorized funds or assets from a trust may be guilty of a felony under Alabama Law and subject to restitution, fines, loss of any or all certificates of authority or other applicable licenses, prison or any combination thereof.

Please enter your full name and any four-digit number of your choosing to show your intention to sign this document.

Representative Name: ___________________________ 4-digit e-Signature: _________

[Submit E-Signature]
Preneed
Contact Information

Phone: 334-240-4420
Fax: 334-206-6347
Email: Preneed@insurance.Alabama.gov
Web Site: http://www.aldoi.gov

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