



**ARKANSAS INSURANCE DEPARTMENT  
LICENSE DIVISION  
1200 WEST THIRD STREET, LITTLE ROCK, AR 72201  
PHONE: 501-371-2750; FAX: 501-683-2604  
Website: [www.insurance.arkansas.gov/license.htm](http://www.insurance.arkansas.gov/license.htm)**

**RESIDENT PRODUCER, ADJUSTER, CONSULTANT AND SURPLUS LINES  
TESTING AND LICENSING INSTRUCTIONS**

Applicant must complete the application and include the proper fee according to the following chart. Cashier's check, company check, or money order should be made payable to "Pearson VUE." **Please note: "Life" and "Health" are two separate exams. Health includes accident/health/sickness. Personal Lines does not qualify for any commercial lines, but only allows a producer to write homeowners, fire and auto coverages.**

Application Type	Licensing and Exam Fees	Proper Application
Producer (Agent)	Life Exam = \$66.00 Health Exam = \$66.00 Life and Health Exam = \$117.00 Property/Casualty Exam = \$66.00 Crop Hail = \$66.00 Personal Lines = \$66.00	Uniform Application for Individual Producer License/Registration
Consultant	1 Exam = \$124 2 Exams = \$136	Uniform Application for Individual Producer License/Registration
Adjuster	1 Exam = \$98.50 2 Exams = \$142 3 Exams = \$185.50	Uniform Application for Individual Producer License/Registration
Surplus Lines Broker/Producer	\$1,101	Uniform Application for Individual Producer License/Registration

The applicant must complete the Arkansas State Police Form ASP-122 (located at the end of the License Application). You must also attach a company check, agency check, money order or cashier's check in the amount of \$22.00 made payable to the "ARKANSAS INSURANCE DEPARTMENT." No personal checks accepted. The completed Form ASP-122 and check made payable to the "Arkansas Insurance Department" must be attached to your application when you send it to the Pearson VUE processing office for an examination permit. THE ASP-122 FORM MUST BE NOTARIZED AND THE DATE SIGNED MUST BE THE SAME DATE AS THE DATE NOTARIZED. THE ASP-122 MUST BE ON A SEPARATE PAGE THAN THE APPLICATION BECAUSE IT IS PROCESSED IN A DIFFERENT LOCATION FROM THE APPLICATION.

**ELECTRONIC APPLICATIONS:** Individuals can submit electronic applications for adjuster and producer examinations. Go to On-Line Services (SBS) and complete the application. The applicant must complete the paper ASP-122 form and send completed form and fee to Pearson Vue along with the fee for the exam. **Starting in March 2015**, we will have the ability for applicants to submit the ASP-122 electronically and make payment by credit card, but you will still be required to send the exam fee check to Pearson Vue.

**PRODUCERS:**

- A. For individuals who want to license for Life, Accident/Health/Sickness, Property and Casualty must complete the application and send it with fee to Pearson Vue.
- B. For an individual who wants to license for limited lines (credit, funeral expense, pre-paid legal) they must complete the application, criminal background form and mail it with fees to the Arkansas Insurance Department.

**CONSULTANTS:**

**Residents Only:** Residents must hold a current producer license or must take the Arkansas Examination.

- A. If you are licensed as a producer, then you must complete the application and submit with a \$120.00 check made payable to

the Arkansas Insurance Department and a \$22.00 business check, money order or cashier's check (no personal checks) made payable to the Arkansas Insurance Department for the criminal background fee.

- B. If you are a resident who is not currently licensed as a producer, then you must complete the application and submit it to Pearson Vue and take the examination.

## **ADJUSTERS:**

### **RESIDENT ADJUSTER**

In order to qualify for the resident adjuster examination an individual must meet the following criteria before the individual can apply to take the adjuster-licensing exam, but if the individual does not meet these requirements, they cannot apply for a permit to take the exam. There are no exceptions to the requirement criteria for a resident of Arkansas. All resident applicants for license must have at least one year of verifiable experience in claims adjustment or must have a licensed Arkansas adjuster complete and sign an affidavit of training ([Page 7](#)). The affidavit attests the applicant will work under the direct supervision of the Arkansas licensed adjuster for 1 year after successfully passing the adjuster license examination. A resident of Arkansas must take an Arkansas examination to become an adjuster. An Arkansas resident cannot substitute an exam in another state for a resident license. All individuals who take the exam are required to take the **General Insurance** category exam and at least one other line of authority exam. The examinations will be offered in three areas: Property, Casualty, and Workers' Compensation. The applicant must mark the lines or categories to be examined on the application.

## **SURPLUS LINES:**

### **Resident Individuals:**

Applicant must be licensed as a property/casualty agent for 3 years. No exceptions. Applicant must complete the application and submit with a \$1,035.00 fee made payable to the Arkansas Insurance Department, a \$66.00 Exam fee made payable to Pearson Vue (Company Check, Money Order or Cashier's Check) and a \$22.00 Criminal Background fee. Residents must also attach a bond, Form AID-LI-SLBB, in favor of the State of Arkansas in the amount of \$50,000. The completed application, fees, and bond must be mailed to Pearson Vue.

All completed paper applications for Producer Life, Accident/Health/Sickness, Property, and Casualty must be sent to Pearson Vue to the address listed below. Applications for the Adjuster, Consultant and Surplus Lines Licenses must be mailed to Pearson Vue. Application for limited lines must be mailed to the Arkansas Insurance Department. You can hand carry the application to Pearson Vue, but the application will not be reviewed while you wait.

**Pearson Vue  
University Tower Building  
1123 South University Avenue, Suite 915  
Little Rock, AR 72204**

If you have a criminal record involving a felony and you are not sure if your record will keep you from being licensed, you can submit your application to Pearson Vue without the exam fee. You must also attach a statement which requests a review of your application prior to the submission of exam fee. In addition, you must provide a full, complete and detailed statement regarding the circumstance of the situation, arrest and conviction, and you must include arrest records, court documentation and parole records (if parole was ordered).

1. This fee includes all initial Arkansas licensing fees and the initial examination fee. These fees are fully earned when the application is processed. ***These fees are not refundable.***
2. The examination permit is good for only 90 days. ***If the applicant has not taken the examination in that period of time, a new application and new fees will be required.***
3. Once the applicant has received an examination permit, the applicant must contact Pearson VUE at 1-888-204-6259 to schedule a test date. ***The test date cannot be scheduled until the applicant has the permit in hand.***
4. If the applicant has held a license in another state, a letter of clearance must be submitted with the application if the previous state does not report license information to the National Database.
5. The applicant must be at least 18 years of age or if not of legal age, minority rights must be removed by a court order and a copy of the court order must be forwarded along with the application and fees.
6. There are pre-license education requirements for producers and consultants that must be completed prior to taking the examination for Life, Accident/Health/Sickness, Property, Casualty, and/or Personal Lines. A candidate must present a certificate of completion at the time the candidate arrives for the examination. ***If the candidate does not have the certificate, the candidate will not be allowed to sit for the examination.*** The majority of the pre-license course must be completed by classroom education,

but up to 5 hours of the pre-license education can be completed by electronic media (Arkansas Law and Ethics are excluded from electronic media self-study). A listing of all pre-license education providers is available on the License Division website in the Online Searches section at [www.insurance.arkansas.gov/license.htm](http://www.insurance.arkansas.gov/license.htm). The course is good for 2 years from the date of completion. The hours required are:

- Life: 20 Hours
- Health (Accident/Health/Sickness): 20 Hours
- Property: 20 Hours
- Casualty: 20 Hours
- Personal Lines: 20 Hours

There are no pre-license education requirements for Adjusters or Surplus Lines—these licenses have experience requirements.

7. Applicants must present two forms of positive identification at the test center on the date of examination - one with a signature and a photograph (preferably a driver's license), and one additional signature identification card. Candidates appearing for examination without proper identification will not be admitted to the examination and will forfeit prepaid examination fees.
8. If the applicant fails the examination, the applicant must call Pearson VUE at 1-888-204-6259 to make a new exam reservation. Re-examination must occur within 90 days of the date the original examination permit was issued.
9. Any applicant failing the examination three (3) times will be required to wait 4 weeks to retake the examination.
10. The examination will be scored at the test center on the date of examination.
11. Licenses will be issued to candidates successfully completing the examination at the test center; however, in order to begin transacting insurance business, a completed appointment form must be submitted to the Department of Insurance.
12. How to complete the License Application:

Since an application is a legal form, certain fields of information are required and must be completed prior to the application being processed. If the required information is not disclosed on the application, the application will be returned for completion. These instructions illustrate the specific areas of the application that must have responses before the application can be processed. If the information is required, the item is marked “**a required field**,” and you must provide us with this information. If you reach a line which is not required and the question does not apply to you, then mark the line “N/A.” However, if you have information you can include it in the non-required field -- one example is your e-mail address—please enter it. If the Department has your e-mail address, we can send e-mail notices of important changes to laws and rules that govern your license.

If the application is over 30 days at the time of submission, it will be returned for current information. If the application is returned for corrections, it must be returned to the processing office within 10 working days -- if the application is not returned promptly, then a new current application and criminal background form will be required.

*\*This is a legal document and corrections should be made by drawing one line through the incorrect information, Do not scratch out the information or use liquid paper. Changes or corrections must be initialed by the applicant showing that the applicant made the change. It is not legal for anyone other than the applicant to complete the application or modify it by removing or adding information. The applicant is held liable for all the information on the application.*

**\*Illegible applications will be returned since we will be unable to review them.**

**Important:** If you have a past criminal record, tax lien or other item which would normally require a “yes” answer and you are not sure if it has been resolved, sealed, or completed, then we suggest you answer yes and provide an explanation. When in doubt answer yes, provide an explanation and documentation. If it is not needed the Department will disregard the information and your application will be processed quicker. If a criminal record has been sealed, then you should have a document signed by a judge which shows the record has been sealed. There is no time limitation on criminal convictions -- even if it is 20 years old, it will still show up on the criminal background search. **Failure to disclose information on the application that is required can cause the application to be declined, or may be grounds to have a license revoked at a later date.**

## **Page 1 of Application**

- (1) Social Security Number---**a required field**

- (2) If assigned, National Producer Number (NPN)
- (3) If applicable, NASD Individual Central Registration Depository (CRD) Number
- (4) Last Name--- **a required field**
- (5) First Name-- **a required field** —THIS MUST BE YOUR LEGAL NAME—NO NICKNAMES.
- (6) Middle Name---not required
- (7) Date of Birth--- **a required field**
- (8) Resident/Home Address-- **a required field**—must be a physical address cannot be a P.O. Box
- (9) City--- **a required field**
- (10) State-- **a required field**
- (11) Zip ---- **a required field**
- (12) Foreign Country
- (13) Home phone number-- **a required field**---you can use cell phone number if you do not have a home phone.
- (14) Individual Applicant Email Address---not required but if the Department does has your e-mail address we can send e-mail notices of important changes to laws and rules that govern your license.
- (15) Gender--- **a required field**
- (16) Are you a Citizen of the United States--- **a required field**—if you are not a citizen you need to attach a copy of your permit to live and work in the United States.
- (17) Business Entity name---not a required field, but you can provide the information if you have a Business Name.
- (18) Business Address—not a required field
- (19) P.O. Box—not a required field
- (20) City—not a required field
- (21) State—not a required field
- (22) Zip—not a required field
- (23) Foreign Country
- (24) Business Phone Number—not a required field
- (25) Business Fax Number—not a required field
- (26) Business e-mail Address—not a required field (e-mail address information should be given so you can receive information from the Department.
- (27) Business Web site Address—not a required field
- (28) Applicant's Mailing Address-- **a required field**
- (29) P.O. Box---not required but complete if mail is to be sent to the P.O. Box
- (30) City-- **a required field**

- (31) State-- **a required field**
- (32) Zip-- **a required field**
- (33) Foreign Country
- (34) Assumed Business Name/Trade Name--- not a required field but should be given if you will use an assumed business name.
- (35) Agency or Business Entity Affiliation—not a required field--However, completing this field will not put you on an agency license—the agency must submit an additional form **#AID-LI-UBE-ADD** and fee. This form can be found on the Department's Web site on the License Forms page under the Business Entity section at [www.insurance.arkansas.gov/license/forms.htm](http://www.insurance.arkansas.gov/license/forms.htm).
- (36) Employment History-- **a required field** —you must show a full 5 years of employment history and your dates must be consistent. If you run out of space you can put information on a piece of paper and attach to the application. Begin with the present then work backwards. This chronology should also include unemployment, military service or full time education.

### **Page 2 of Application**

- (37) Type of License---Producer, Consultant, Adjuster or Surplus Lines Producer---and Lines of Authority --- **a required field**

*Note: (Important) there are two types of property licenses:*

- Multi-Line (property, casualty, surety, marine) which includes commercial lines and personal lines coverages.
- Personal Lines (only) which does not include commercial lines—if you take Personal Lines (only) you will not be able to sell commercial coverages unless you retest, taking the Commercial Lines Examination.

### **Page 3 & 4 of Application**

- (38) Background Questions -- **Required Fields –Required Documentation**

**If you answer any of the questions yes, you must attach a statement detailing what occurred and what was the outcome of the occurrence. If you answer yes to 38-3 you must attach a complete credit report.** The application indicates what additional documentation is required with the exception of question **38.7** and if you answer yes, attach a statement regarding the reason for the arrearage, and documentation from Child Support Enforcement showing your current status of arrearage. **If you have filed a bankruptcy, then attach a current and complete credit report to your application.**

### **Page 5 of Application**

- (39) Applicant's Certification and Attestation -- **Required Fields**

The application must be dated and signed with your **FULL LEGAL NAME**---no nickname or printed name. It must be a wet signature—not a stamp or copy.

The next line must contain your full legal name—printed or typed

Any questions regarding the completion of an application should be addressed to the Pearson VUE Processing Center at 501-663-2878 ([www.pearsonvue.com](http://www.pearsonvue.com)) or to the Arkansas Insurance Department License Division at 501-371-2750. Applications should be mailed to:

**Pearson VUE  
University Tower Building  
1123 South University Avenue, Suite 915  
Little Rock, AR 72204**



ARKANSAS STATE POLICE

ASP-122  
(Rev. 11/05)

Identification Bureau  
Individual Record Check Form

Full Name: \_\_\_\_\_ / \_\_\_\_\_  
First Middle Last Name Maiden/Other

Date of Birth: \_\_\_\_\_ State of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_  
(Month/Day/Year)

Social Security #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State ZIP

Daytime Phone #: ( ) \_\_\_\_\_

I GIVE MY CONSENT FOR THE ARKANSAS STATE POLICE TO CONDUCT A CRIMINAL RECORD SEARCH ON MYSELF AND RELEASE ANY RESULTS TO THE FOLLOWING PERSON OR ENTITY:

Name: ARKANSAS INSURANCE DEPARTMENT  
(First/MI/Last Name) or Full Name of Agency

Mailing Address: 1200 West Third Street Little Rock AR 72201-1904  
Street City State ZIP

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(First/MI/Last Name) (Month/Day/Year)

**(NO REQUEST WILL BE PROCESSED WITHOUT A NOTARIZED SIGNATURE)**

STATE OF \_\_\_\_\_

§

COUNTY OF \_\_\_\_\_

Subscribed and sworn before me, a Notary Public, in and for the county and state aforesaid, this the

\_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

☐ 82001 Civil Record Check

## ADJUSTER AFFIDAVIT FOR EXPERIENCE OR APPRENTISTSHIP

### TO BE COMPLETED BY SUPERVISING ADJUSTER, COMPANY REPRESENTATIVE, OR ADJUSTING FIRM

I hereby certify that I have investigated the character and record of the Applicant as to the trustworthiness and general qualifications; have examined the answers in this Application, and that I endorse said Application for an Adjuster License. Acting as the supervising adjuster, I will directly supervise and review all claims processing of this individual for 1 full year and I will provide notice to the Arkansas Insurance Department if the applicant fails to remain under my supervision for 1 full year of adjusting claims. I further certify that the applicant will adjust only those lines of insurance for which he is licensed, to wit and such adjustment will be carried out under the careful supervision.

\_\_\_\_\_Property      \_\_\_\_\_Casualty      \_\_\_\_\_Workers Compensation

My investigation has consisted of \_\_\_\_\_

\_\_\_\_\_  
Signature of Supervising Adjuster

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date Signed

Arkansas License Number of Supervision Adjuster \_\_\_\_\_

**I have one year's experience of processing claims and the apprentice program of 1 year supervised licensure does not apply to me.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed