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## **Montana UCAA Primary Certificate of Authority Application Filing Requirements**

### **General Requirements**

General Requirements are the same as UCAA Requirements.

### **Corporate Documents**

1. Triplicate originals of the articles of incorporation and a copy of the by-laws, certified by the company's secretary, should be included in the application. The approved articles will be returned to the applicant to be filed with the Secretary of State.
2. If a RECIPROCAL INSURER, submit copies of the power of attorney of company's attorney-in-fact, together with subscriber's agreement certified by its attorney-in-fact. [Sec. 33-2-115(3), MCA].

### **Financial Reporting Information**

Financial reporting documentation is the same as the UCAA requirements.

### **General Operations Information**

General operations information is the same as UCAA requirements.

### **Rate and Form Filing Requirements**

To obtain a certificate of authority, the insurer, pursuant to 33-2-115(10), MCA, must provide specimen copies of policies proposed to be offered in this state, together with premiums or premium rates applicable, or a declaration that such rates as applicable will be those promulgated by designated rating organizations authorized to file such rates in this state on behalf of the insurer.

The specimen policies and rates that are to be submitted with the application for the certificate of authority are for preliminary review purposes only and not reviewed for compliance with Montana Rate and Form statutes. If the insurer chooses to write policies in Montana, the required rate and form filings will need to be submitted separately. Please refer to <http://www.csi.mt.gov/> for information and contacts regarding your product rate and form filing process.

If the insurer indicates it is applying for "Reinsurance Only," its certificate of authority will be restricted to the lines of authority requested on a reinsurance only basis. Companies requesting authorization for "Reinsurance Only" are not subject to any rate and form filings.

## **Producer Licensing**

The contact for producer licensing is [producerlicensing@mt.gov](mailto:producerlicensing@mt.gov).

## **Attention Workers' Compensation Insurers**

Workers' Compensation Insurers will also be under the regulation of the Montana Department of Labor and Industry, Employment Relations Division, 301 S. Park Avenue, 5th Floor; PO Box 8011, Helena, MT 59604-8011. Contact: Adrienne McLean, (406) 444-1555, AMcLean@mt.gov; Jason Swant (406) 444-6541, JSwant@mt.gov