DILIGENT SEARCH STATEMENT

To:	Insurance Commissioner, State of Oregon	
Insured Name:		
Policy Number:		
-		
Policy Inception Date:		
Policy Expiration Date:		
Type of Coverage Provided:		
I have determined that, as per the definition as stated in the federal <i>Nonadmitted and Reinsurance Reform Act of 2010 Sec. 527</i> , Oregon is the "home state" for this policy. (A copy of the federal <i>Nonadmitted and Reinsurance Reform Act of 2010</i> can be viewed online at www.OregonSLA.org under "Publications").		
The Insured was expressly advise	ed prior to placement of this insurance in the SURPLUS LINE MARKET that:	
A. The Surplus Lines ins is not subject to its su	surer with whom the insurance was placed is not licensed in this state and	
B. In the event of the ins	solvency of the SURPLUS LINES insurer, losses will not be paid by the CE GUARANTY FUND .	
Salact (chack) Statement 1	Statement 2, OR Statement 3:	
Select (check) Statement 1,	Statement 2, OK Statement 3.	
Statement 1:		
I hereby certify that I have made a diligent effort to place this insurance with companies admitted to write business in Oregon for this class. I am unable to place the full amount or kind of insurance with companies admitted to transact and who are actually writing the particular kind and class of insurance in this state. I am therefore placing this insurance in the <i>SURPLUS LINE MARKET</i> .		
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Statement 2:		
I have determined that the insured is currently registered with Oregon as a Risk Purchasing Group (RPG) , to purchase liability insurance on a group basis, and that this policy placement is exempt from the Diligent Search requirement.		
Statement 3:		
I have determined that, as per the definition as stated in the <i>Nonadmitted and Reinsurance Reform Act of 2010 Sec. 527</i> , this insured is an exempt commercial purchaser , that the requirements as set forth in the federal <i>Nonadmitted and Reinsurance Reform Act of 2010 Sec. 525</i> have been complied with, and that this policy placement is exempt from the Diligent Search requirement. (A copy of the federal <i>Nonadmitted and Reinsurance Reform Act of 2010</i> can be viewed online at www.OregonSLA.org under "Publications").		
Printed Name of Producing Agent		
Signature of Producing Agen	nt	
Printed Name of Agenc	y	
Date Signe	ed	

DILIGENT SEARCH STATEMENT

	To:	Insurance Commissioner, State of Oregon	
	Insured Name:	Name of Insured	
	Policy Number:	Policy Number	
	Policy Inception Date:	Policy Effective Date	
	Policy Expiration Date:	Policy Expiration Date	
	Type of Coverage Provided:	Type of Coverage ex: Property, General Liability	
	I have determined that, as per the definition as stated in the federal <i>Nonadmitted and Reinsurance Reform Act of 2010 Sec. 527</i> , Oregon is the "home state" for this policy. (A copy of the federal <i>Nonadmitted and Reinsurance Reform Act of 2010</i> can be viewed online at www.OregonSLA.org under "Publications").		
The Insured was expressly advised prior to placement of this insurance in the SURPLUS LINE MARKET that:			
	A. The Surplus Lines in is not subject to its su	surer with whom the insurance was placed is not licensed in this state and apervision.	
	B. In the event of the ins	solvency of the SURPLUS LINES insurer, losses will not be paid by the CE GUARANTY FUND .	
	Select (check) Statement 1, Statement 2, OR Statement 3:		
	·		
X	Statement 1:		
	I hereby certify that I have made a diligent effort to place this insurance with companies admitted to write business in Oregon for this class. I am unable to place the full amount or kind of insurance with companies admitted to transact and who are actually writing the particular kind and class of insurance in this state. I am therefore placing this insurance in the SURPLUS LINE MARKET .		
	•••••		
	Statement 2:		
	I have determined that the insured is currently registered with Oregon as a Risk Purchasing Group (RPG) , to purchase liability insurance on a group basis, and that this policy placement is exempt from the Diligent Search requirement.		
	•••••		
	Statement 3:		
	I have determined that, as per the definition as stated in the <i>Nonadmitted and Reinsurance Reform Act of 2010 Sec. 527</i> , this insured is an exempt commercial purchaser , that the requirements as set forth in the federal <i>Nonadmitted and Reinsurance Reform Act of 2010 Sec. 525</i> have been complied with, and that this policy placement is exempt from the Diligent Search requirement. (A copy of the federal <i>Nonadmitted and Reinsurance Reform Act of 2010</i> can be viewed online at www.OregonSLA.org under "Publications").		
	•••••		
	Printed Name of Producing Agen	Name of Agent	
	Signature of Producing Ager	nt <u>Signature of Agent</u>	
	Printed Name of Agenc	Name of Agent's Agency	
	Date Signe	ed Date SL Form was Signed	