

Certification of Effort To Place Risk With Authorized Insurer (continued)
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The following insurers are among those that I contacted relative to this risk, or to substantially similar risks within the past 30 days:

<u>INSURER</u>	<u>REPRESENTATIVE</u>	<u>TELEPHONE NO.</u>	<u>DATE</u>	<u>RESULTS CODE*</u>
<u>Insurers Contacted</u>	<u>Representative</u>	<u>Phone Number</u>	<u>Date</u>	<u> </u>
<u>Insurers Contacted</u>	<u>Representative</u>	<u>Phone Number</u>	<u>Date</u>	<u> </u>
<u>Insurers Contacted</u>	<u>Representative</u>	<u>Phone Number</u>	<u>Date</u>	<u> </u>

*Result Codes: (enter appropriate code(s) for each insurer listed above)

- A. -- Having made a diligent effort. I was unable to obtain an offer/quote from this authorized insurer in the admitted market, which declined to accept all or any part of the risk.

AND/OR

- B. -- Having made a diligent effort, the only offer (s)/ quote(s) obtained reflected such a substantial increase in premium over similar coverage placed within the preceding 12 months that comparable coverage is, as a practical matter, unavailable from this authorized insurer in the admitted market.

AND / OR

- C. -- Having made a diligent effort. , the only offer (s)/ quote(s) obtained reflect(s) such a substantial reduction in coverage from coverage placed within the preceding 12 months for substantially similar premium that comparable coverage is, as a practical matter, unavailable from this authorized insurer in the admitted market.

I certify that the foregoing statements made by me are true to the best of my knowledge and belief. I am aware that if any of the statements are willfully false, I am subject to civil and criminal penalties.

Date signed
(Date)

Insured's Signature
(Signature)

Amended by R.2005 d.104, effective April 4, 2005.
See: 36 N.J.R.2144(a), 37 N.J.R.1065(a).

The above hereby certifies that he/she is duly licensed as an insurance producer under the laws of New Jersey, and that: On or about _____, 20__, I was engaged by the insured named herein to procure insurance of the kind described herein and in the amount shown. I have made a diligent effort first to place this coverage with authorized insurers, each of which is authorized in New Jersey to write insurance of the kind requested and is an insurer that I had a good faith reason to believe might consider writing the type of coverage described herein.

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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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