

MARYLAND INSURANCE ADMINISTRATION

RENEWAL APPLICATION FOR MOTOR CLUB LICENSE

Application is hereby made by ______ (Name of Applicant) for authority to transact business within the State of Maryland.

1. Telephone number:

2. Fees to be charged to members:

The Applicant hereby affirms that it is an employer that is in compliance with the Worker's Compensation Laws of Maryland (The Labor and Employment Article Title 9, Annotated Code of Maryland in that:

It is not required to provide employee coverage under Maryland Worker's Compensation Laws.

It is in compliance with the provisions of the Labor and Employment Article Title 9 of the Annotated Code of Maryland (attach Certificate issued by the Worker's Compensation Commission).

It has secured the required Worker's Compensation Employee Coverage under policy number with an effective date of ______ and an expiration date of issued by ______ (name of insurer), an Insurance Company authorized to write such insurance in the state of Maryland.

> Pursuant to §10-401 of the State Government Article, Annotated Code of Maryland, this Application and Certificate of Compliance with the Maryland Workers' Compensation Act has been executed by the Company's duly authorized Officer.

> > (Signature of Officer)