



OFFICE OF COMMISSIONER OF INSURANCE
COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER



Ralph T. Hudgens, Commissioner

2 Martin Luther King Jr., Dr., Suite 604, West Tower, Atlanta, GA 30334

Phone: 404-232-1489 ♦ Fax: 770-344-5355 ♦ E-mail: lwright@oci.ga.gov

www.oci.ga.gov

NON-TRADITIONAL ENTITIES
GID-006-NT NOV2016

VEHICLE PROTECTION WARRANTOR APPLICATION

1. Name and address of the Vehicle Protection Warrantor:

<u>Name</u>	<u>Address</u>
_____	_____
_____	_____
_____	_____

2. List any other name(s) by which the Vehicle Protection Warrantor is known or may be doing business in this State or any other state:

3. This Vehicle Protection Warrantor is a corporation or a person whose primary activity consists of the sale and subsequent written warranty of various vehicle protection products including, but not limited to, alarm systems, body part marking products, steering locks, window etch products, pedal and ignition locks, fuel and ignition kill switches, and electronics, radio and satellite tracking devices.

The written agreement provides that if the product fails to prevent loss or damage to a vehicle from a specific cause, then the warranty holder shall be paid specified incidental costs by the warrantor as a result of the failure of the vehicle protection product to perform pursuant to the terms of the warranty.

4. The Vehicle Protection Warrantor is organized for the primary purpose of conducting the activity described under Item #3 above.

5. Provide the telephone number, e-mail address, and FEIN of the Vehicle Protection Warrantor:

<u>Telephone #</u>	<u>E-mail Address</u>	<u>FEIN</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Identify and give the telephone number of the executive officer, officer(s) or director(s) of the Vehicle Protection Warrantor directly responsible for the warrantor's vehicle protection business:

<u>Name</u>	<u>Title</u>	<u>Telephone #</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. List the name, telephone number and address of any administrator(s) designated by the warrantor to be responsible for the administration of vehicle protection product warranties in this state: (attach additional pages, if necessary.)

<u>Name</u>	<u>Telephone #</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



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GID-006-NT NOV2016

VEHICLE PROTECTION WARRANTOR APPLICATION

<u>Name</u>	<u>Telephone #</u>	<u>Address</u>
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_____	_____	_____
_____	_____	_____



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Ralph T. Hudgens, Commissioner

2 Martin Luther King Jr., Dr., Suite 604, West Tower, Atlanta, GA 30334

Phone: 404-656-7556 ♦ Fax: 770-344-5798 ♦ E-mail: TBrewster@oci.ga.gov



www.oci.ga.gov

VEHICLE PROTECTION WARRANTOR APPLICATION

**NON-TRADITIONAL ENTITIES
GID-006-NT JAN2014**