STATE OF WEST VIRGINIA
Offices of the Insurance Commissioner
Financial Conditions Division

Mailing Address:
Financial Conditions
PO Box 50540
Charleston, WV 25305-0540

Telephone: (304) 558-2100
Facsimile: (304) 558-1365
Email: financial.conditions@wvinsurance.gov
www.wvinsurance.gov

Location:
Financial Conditions
1124 Smith Street, Rm 102
Charleston, WV 25301

WV Offices of the Insurance Commissioner

Rate and Form Filing Fees

Senate Bill 479, effective June 6, 2002, amends Section 34, Article 6, Chapter 33 of the W. Va. Code. As amended, all rate, rule and form filings submitted to the WV Offices of the Insurance Commissioner after June 30, 2002 will be subject to the new filing fee structure. Please see the chart below for details. If you have any questions, please contact the Rates and Forms Division at (304) 558-2094.

Form Filing	$50.00
Rule Filing	$75.00
Rate Filing	$75.00

New Rate and Form Filing Fee Structure:

Type of Filing:	Files per Type:	Cost per Filing:
Form	$50.00	$50.00
Form/Rule	$50.00 + $75.00	$125.00
Rate/Form	$75.00 + $50.00	$125.00
Rate	$75.00	$75.00
Rate/Rule	$75.00 + $75.00	$150.00
Rate/Rule/Form	$75.00 + $75.00 + $50.00	$200.00
Rule	$75.00	$75.00

All filings must be submitted in **SERFF** (System for Electronic Rate and Form Filing) and all filing fees must be remitted via **EFT** through **SERFF**.

RATING ORGANIZATIONS:

Application for Admission*..... $100.00
Annual Renewal..... $100.00

*The License is good for a 3 year period.

STATE OF WEST VIRGINIA
Offices of the Insurance Commissioner
Financial Conditions Division

Mailing Address:
Financial Conditions
PO Box 50540
Charleston, WV 25305-0540

Telephone: (304) 558-2100
Facsimile: (304) 558-1365
Email: financial.conditions@wvinsurance.gov
www.wvinsurance.gov

Location:
Financial Conditions
1124 Smith Street, Rm 102
Charleston, WV 25301

AGENTS LICENSING & EDUCATION

Examination – Administered by Pearson Vue $110.00
Letter of Certification $5.00
Letter of Clearance $10.00
C. E. Reinstatement ..... $5.00 per hr
(Completed after Compliance Date)

Company Appointments $25.00
Annual Renewal Appointments $25.00
(Domestic Farm Mutuals Pay $5 for Resident Appointments)

Application for Producer License (Resident/Non-Resident License) $50.00
Producer Biennial Renewal $50.00
Late Renewal Fee for Producer License $100.00

Application for Surplus Lines License $200.00
Annual Renewal for Surplus Lines License (due May 31) $200.00
Late Renewal for Surplus Lines License $300.00

Application for Business Entity License $200.00
Annual Renewal for Business Entity License (due June 30) $200.00
Late Renewal Fee for Business Entity License $225.00

Application for Adjuster License $25.00
Annual Renewal for Adjuster License (due May 31) $25.00
Late Renewal Fee for Adjuster License $50.00
Emergency Adjuster $0.00

Application for Viatical Broker Business Entity $200.00
Renewal Fee for Viatical Broker Business Entity (due June 30) $200.00
Late Renewal Fee for Viatical Broker Business Entity $400.00

Application for Viatical Broker Individual $50.00
Renewal Fee for Viatical Broker Individual $50.00
Late Renewal Fee for Viatical Broker Individual $100.00

1033 Waiver $100.00

If you have any questions pertaining to this page, please contact
the Agents Licensing & Education Division at (304) 558-0610.

STATE OF WEST VIRGINIA
Offices of the Insurance Commissioner
Financial Conditions Division

Mailing Address:
Financial Conditions
PO Box 50540
Charleston, WV 25305-0540

Telephone: (304) 558-2100
Facsimile: (304) 558-1365
Email: financial.conditions@wvinsurance.gov
www.wvinsurance.gov

Location:
Financial Conditions
1124 Smith Street, Rm 102
Charleston, WV 25301

LICENSED INSURANCE COMPANIES

Application for Admission, including all documents $100.00
Annual Examination Assessment Fee (due July 1) $1,050.00
Annual license, initial, and renewal (due May 31) $200.00
Certificate of Compliance, Deposit, or Good Standing (each) $15.00
Copy of Certificate of Authority (stamped/sealed) $15.00
Filing of additional paper required by law or furnishing copies thereof $1.00
Filing of Amended Articles of Incorporation $50.00
Filing of Amended Bylaws $50.00
Filing of Annual Statement (due March 1) $100.00

Filing of individual forms per company ..... See Rate and Form Filing Fee above
Filing of individual rates per company ..... See Rate and Form Filing Fee above
Filing of individual rules per company ..... See Rate and Form Filing Fee above

ACCREDITED REINSURERS

Annual Examination Assessment Fee (due July 1) $1,050.00
Application for Admission $100.00
Filing of Annual Statement (due March 1) $100.00

CAPTIVE INSURANCE COMPANY

Application for Admission, including all documents $200.00
Application for Admission, license fee $300.00
Annual Renewal (due May 31) $300.00

CHARITABLE GIFT ANNUITIES

Application for Admission $0.00
Annual Renewal ..... Not Applicable

DISCOUNT MEDICAL PLAN ORGANIZATION

Application for Admission $300.00
Annual Renewal (due May 31) $100.00
Annual Renewal (received after May 31) $100.00

DISCOUNT PRESCRIPTION DRUG PLAN ORGANIZATION

Application for Registration $0.00
Annual Renewal (due May 31) $0.00

FARMERS' MUTUAL FIRE

Annual Examination Assessment Fee (due July 1) $1,050.00
Filing of Annual Statement (due March 1) $25.00

FRATERNAL ASSOCIATIONS

Annual Examination Assessment fee (due July 1) $1,050.00
Annual license, initial and renewal (due May 31) $50.00
Filing of Annual Statement (due March 1) $25.00

Mailing Address:
Financial Conditions
PO Box 50540
Charleston, WV 25305-0540

Telephone: (304) 558-2100
Facsimile: (304) 558-1365
Email: financial.conditions@wvinsurance.gov
www.wvinsurance.gov

Location:
Financial Conditions
1124 Smith Street, Rm 102
Charleston, WV 25301

HEALTH MAINTENANCE ORGANIZATIONS

Amendment to Original Application $200.00
Annual Examination Assessment Fee (due July 1) $1,050.00
Application for Admission, including all documents $200.00
Filing of Annual Statement (due March 1) $100.00

HOSPITAL/MEDICAL/DENTAL/HEALTH SERVICE CORPORATIONS

Annual Examination Assessment Fee (due July 1) $1,050.00
Application for Admission, including all documents $200.00
Annual Renewal (due May 31) $200.00

MANAGING GENERAL AGENT

Application for Admission $500.00
Annual Renewal (due June 30) $200.00
Late Filing Fee of Annual Renewal $400.00

PREPAID LIMITED HEALTH SERVICE ORGANIZATIONS

Application for Admission $200.00
Amendment to Original Application $200.00
Annual Renewal (due March 1) $200.00
Filing of Annual Statement (due March 1) $25.00
Annual Examination Assessment Fee (due July 1) $1,050.00

PROFESSIONAL EMPLOYER ORGANIZATION OR GROUP

Application for Admission $300.00
Annual Renewal (due July 1) $300.00
Application for Admission of a Limited License $200.00

PROVIDER SPONSORED NETWORKS

Application for Admission $200.00
Amendment to Original Application $200.00
Filing of Annual Statement (due March 1) $100.00
Annual Renewal (due March 1) $200.00
Annual Examination Assessment Fee (due July 1) $1,050.00

REINSURANCE INTERMEDIARY

Application for Admission $500.00
Filing Statements Preliminary to Admission $100.00
Annual Renewal (due June 30) $200.00
Late Filing Fee of Annual Renewal $400.00
Filing of Annual Reports $100.00
Filing of Certified Copy of Articles of Incorporation $50.00
Filing of Copy of Bylaws/Charters $50.00
Filing of Designated Contract $25.00
Filing of Notification of Termination of a Contract $10.00
Filing of Legal Name Change $75.00
Filing of Address Change $25.00

Mailing Address:
Financial Conditions
PO Box 50540
Charleston, WV 25305-0540

Telephone: (304) 558-2100
Facsimile: (304) 558-1365
Email: financial.conditions@wvinsurance.gov
www.wvinsurance.gov

Location:
Financial Conditions
1124 Smith Street, Rm 102
Charleston, WV 25301

Filing to Add or Delete Names on the License $25.00
Filing a Bond or an Errors and Omissions Policy $25.00
Request for Certificate of Condition (or Good Standing) $20.00

RISK PURCHASING GROUPS

Application for Registration $200.00
Modification to Registration $50.00

RISK RETENTION GROUPS

Filing of Annual Statement Fee (due March 1) $100.00
Application for Registration $200.00
Modification to Registration $50.00

SURPLUS LINES

Application for Admission, including all documents (Foreign/Alien) $100.00
Filing of Annual Statement (due March 1) $100.00

THIRD PARTY ADMINISTRATORS

Annual Renewal for Home State (due July 1) $300.00
Annual Renewal for Non-Resident (due October 31) $200.00
Annual Renewal for Registered (due October 31) $0.00
Filing of additional paper required by law or furnishing copies thereof $1.00
Request for Certificate of Good Standing $25.00
Request for Certificate of Authority $25.00
Application for Admission (Home State/Non-Resident) $300.00
Application for Registration $0.00
Filing of Certified Copy of Articles of Incorporation $50.00
Filing of a copy of Bylaws (or Charter) $50.00

VIATICAL SETTLEMENT PROVIDER

Application for Admission $600.00
Annual Renewal (due May 31) $300.00
Late Filing Fee of Annual Renewal $600.00

Mailing Address:	Telephone: (304) 558-2100	Location:
Financial Conditions	Facsimile: (304) 558-1365	Financial Conditions
PO Box 50540	Email: financial.conditions@wvinsurance.gov	1124 Smith Street, Rm 102
Charleston, WV 25305-0540	www.wvinsurance.gov	Charleston, WV 25301

All insurance fees remittances are payable to the "WV Offices of the Insurance Commissioner" except statutory attorney fee of $10.00 payable to the West Virginia Secretary of State.

Retaliatory provisions apply, in the aggregate, to all taxes and fees.

The information here shown is in summary form. For statutory provisions and definitions see W. Va. Code Chapter 33.

STATUTORY DEPOSITS

Domestic Companies $100,000

$100,000 or Certificate from insurance official that a like deposit is being maintained.

$100,000 or satisfactory evidence of assets maintained within the United States equal to liabilities together with an amount equal to required deposit.