



BROKER MEMBERSHIP FORM

(Print legibly or type)

Date

Name

Firm

Mailing Address

City

State

Zip

Broker Email

Ph

Email address for my Stamping Fee Invoice

*I am an IDAHO licensed **Resident** **Non-Resident** Surplus Line Broker. I hereby report for membership in the Surplus Line Association of Idaho, Inc. I agree to support the Constitution and By-Laws of this Association and to abide by the Surplus Line Code and Rules of the State of Idaho. I understand that I must notify the Surplus Line Association of Idaho if above information changes or if my Idaho S/L license is not renewed.*

Idaho S/L Lic #

S/L Broker Signature

- *The Idaho S/L license is an individual license. You, as the licensed broker, accept the responsibility and authority ... not the agency/brokerage firm. The license and premium tax follow you, should you change firms. Bulletins to brokers and notification of changes to Idaho's White List are sent via e-mail; it is critical that you provide an accurate e-mail address. Please type or print clearly.*
- *Membership in the SLA Idaho is mandatory 41-1214(1). If this statement is not completed and returned to the SLA of Idaho within 10 days of receipt, DOI Licensing will be notified.*

★ **Within 10 days, email completed form to carrie@idahosurplusline.org**

Upon receipt of this form, we will forward information to facilitate your premium tax filings. Brokers find it useful to review the [FAQ](#) and [Guide to Online Filing](#) at our website.

Welcome to SLA of Idaho and please let us know if you have further questions.