

**OFFICE OF SUPERINTENDENT OF INSURANCE  
COMPANY LICENSING BUREAU  
PHYSICAL ADDRESS: 1120 PASEO DE PERALTA, ROOM 439, SANTA FE, NM 87501  
MAILING ADDRESS: P.O. BOX 1689, SANTA FE, NM 87504-1689  
(505) 827-4362**

**SUMMARY OF REQUIRED DOCUMENTS FROM  
MOTOR CLUBS SEEKING ADMISSION TO TRANSACT  
BUSINESS IN THE STATE OF NEW MEXICO**

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**NAME OF MOTOR CLUB**

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In support of the application, please furnish the OSI with the items listed below:

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- \_\_\_\_\_ 1.     **APPLICATION FEE 59A-50-3 & 59A-6-1(T)(A)**     A non-refundable application fee in the sum of \$200.00 must accompany this application before it can be reviewed. Make the check payable to the ***Office of Superintendent of Insurance or OSI.***
  
- \_\_\_\_\_ 2.     **APPLICATION FOR CERTIFICATE OF AUTHORITY 59A-50-4(A)**     Apply by letter requesting admission on behalf of the motor club.
  
- \_\_\_\_\_ 3.     **ARTICLES OF INCORPORATION 59A-50-4(B)(1)**     If a corporation provide the company's initial Articles of Incorporation and all amendments thereto. The Articles of Incorporation must be certified, and bear the seal of the state official having custody of the original documents.
  
- \_\_\_\_\_ 4.     **IF NOT INCOPORATED 59A-50-4(B)(2)**     Provide a list of all persons owning an interest in the motor club, the officers thereof and the parties to any operating or management agreement affecting the applicant, together with a copy of such agreement..
  
- \_\_\_\_\_ 5.     **CERTIFICATE OF GOOD STANDING 59A-50-4(B)(1)**     Submit a Certificate of Good Standing from the New Mexico Office of the Secretary of State, Corporations Division.
  
- \_\_\_\_\_ 6.     **BY-LAWS 59A-50-4(A)**     A copy of the By-Laws, certified by the corporate secretary and bearing the corporate seal of the motor club.
  
- \_\_\_\_\_ 7.     **UNIFORM CONSENT TO SERVICE OF PROCESS 59A-50-12**     A properly executed document authorizing the Superintendent of Insurance to accept Service of Process on behalf of the Motor Club. The NAIC UCAA Form 12 is available on the NAIC website at [www.naic.org](http://www.naic.org).
  
- \_\_\_\_\_ 8.     **FINANCIAL STATEMENT 59A-50-4(B)(3)**     A financial statement certified by a registered or certified public accountant.
  
- \_\_\_\_\_ 9.     **CERTIFICATE OF COMPLIANCE 59A-50-4(A)**     A certified Certificate of Compliance by the state of domicile.

- \_\_\_\_\_ 10. **SERVICE CONTRACTS 59A-50-4(B)(4)** A copy of the motor club's service contracts that will be issued to members including rate schedules.
- \_\_\_\_\_ 11. **CONTACT PROCESSING FORM 59A-50-4(A)** Must be completed in its entirety.
- \_\_\_\_\_ 12. **PLAN OF OPERATION 59A-50-4(A)** Provide an overview of the motor club's New Mexico business plan. Comment on the type of market segment, marketing system, anticipated volumes, and New Mexico offices.
- \_\_\_\_\_ 13. **DEPOSIT 59A-50-4(B)(5)** A deposit is required to be made with the Insurance Division upon approval for licensure.
  1. Please provide the original Surety Bond, which can be found at <https://www.osi.state.nm.us/index.php/departments/compliance-division/company-licensing-bureau/>
  2. Please provide us with three original Deposit Form 600 (three original "wet" signatures on each form), which can be found at <https://www.osi.state.nm.us/index.php/departments/compliance-division/company-licensing-bureau/>
- \_\_\_\_\_ 14. **RENEWAL NOTICE 59A-50-5(C),59A-50-4(B)(5) & 59A-6-1(T)(1)(B)** Please provide us with a written statement acknowledging that the company must renew its Certificate of Authority on or before March 1 yearly and that the OSI will not issue a new Certificate of Authority upon renewal since they are perpetual.
  1. In addition, as a prerequisite to continuance of the certificate of authority the motor club will need to file its financial statements for the previous calendar year. Financial Statements must be submitted by June 1 yearly.
  2. A statement must be included indicating the amount of annual membership fees collected from state residence for the period of January 1 through December 31, which is due no later than May 1 yearly.

**Please mail the application fee along with items 1 through 14 in paper form to:**

**Office of Superintendent of Insurance (OSI)  
Attn: Company Licensing Bureau  
1120 Paseo De Peralta, Room 439  
Santa Fe, New Mexico 87501**

**If you have any questions regarding the requested documents above, please contact the Company Licensing Bureau at 505-827-4362.**

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CONTACT PROCESSING FORM

COMPANY COMPLETE NAME – Do not abbreviate name.

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**STATUTORY HOME OFFICE ADDRESS**

**MUST BE LOCATED IN STATE OF DOMICILE (PER NMSA §59A-5-22(B))** – As identified with the Certificate of Authority in domiciled state (This definition is consistent with the Annual Statement)

<u>Physical location only:</u>		
<u>City:</u>	<u>State:</u>	<u>Zip Code:</u>
<u>Contact Person:</u>	<u>Email Address:</u>	<u>Phone Number:</u>

**COMPANY MAILING ADDRESS**

<u>Street, P O Box, etc.:</u>		
<u>City:</u>	<u>State:</u>	<u>Zip Code:</u>
<u>Contact Person:</u>	<u>Email Address:</u>	<u>Phone Number:</u>

**COMPANY CONTACT FOR GENERAL & SPECIAL DEPOSITS/SURETY BONDS**

<u>Street, PO Box, etc.:</u>		
<u>City:</u>	<u>State:</u>	<u>Zip Code:</u>
<u>Contact Person:</u>	<u>Email Address:</u>	<u>Phone Number:</u>