

REQUEST FOR CONFIDENTIAL STATUS / OSI'S DETERMINATION NOTICE

To request that the Office of Superintendent of Insurance ("OSI") deem a document, or part of a document, confidential, complete this form and a justification declaration, and submit both to OSI at Freya.Tschantz2@state.nm.us.

Date of Request: _____ Name of Regulated Entity or Party Making Request: _____

Filer Name: _____ Filer's Email Address: _____ Telephone: _____

Declarant: _____ Declarant Email Address: _____

Purpose of Proposed Submission _____ SERFF Tracking number, if any: _____

Identify documents and/or segments thereof for which confidential handling is requested. A maximum of five (5) documents will be considered per request.

Index No.	File Name (Must be the same as it will appear when the file is delivered to OSI.)	<u>Confidential Reason/Statute</u>		
1.				
*****OSI use only*****	Request Approved Y/N	IPRA Y/N	Reviewer Comments:	
Reviewer Determination as to Index No. 1				
2.				
*****OSI use only*****	Request Approved Y/N	IPRA Y/N	Reviewer Comments:	
Reviewer Determination as to Index No. 2				

3.			
*****OSI use only***** Reviewer Determination as to Index No. 3	Request Approved Y/N	IPRA Y/N	Reviewer Comments:
4.			
*****OSI use only***** Reviewer Determination as to Index No. 4	Request Approved Y/N	IPRA Y/N	Reviewer Comments:
5.			
*****OSI use only***** Reviewer Determination as to Index No. 5	Request Approved Y/N	IPRA Y/N	Reviewer Comments:

OSI Reviewer Signature

(print name and title)

Date

FILER CERTIFICATION: *I certify that the document(s) filed with this notice is/are the document(s) described in the confidentiality request.*
(To be signed following Reviewer's Determination.)

Filer Signature

(print name and title)

Date

JUSTIFICATION DECLARATION IN SUPPORT OF REQUEST FOR CONFIDENTIAL OR PRIVILEGED STATUS

If the information provided in the justification declaration is not sufficiently detailed to evaluate the confidentiality request, the OSI reviewer may summarily reject your request. If you contend that the justification may disclose confidential information, note that in the justification and the reviewer will contact you to obtain additional information or to arrange a virtual viewing of the proffered materials. Any legal justification for a request must be submitted in writing to OSI.

I, _____ declare, under penalty of perjury of the state of New Mexico, that the facts related in this declaration are true and correct:

I make this declaration upon personal knowledge, in support of _____'s assertion that the following documents or their specified segments/contents should be deemed confidential by OSI.
[Requestor's Name]

Index No.	Grounds for Request, Including Legal Authority and Risk of Potential Harm If Disclosed
1.	
2.	
3.	

Index No.	Grounds for Request, Including Legal Authority and Risk of Potential Harm If Disclosed
4.	
5.	

Signature

(print name and title)

Date