



Commissioner of Securities & Insurance  
 Montana State Auditor  
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**Uniform Application Checklist for Certified Reinsurers**  
**(Initial and Renewal Applications)**

**I. Applicant Information**

|   |
|---|
| Company Name:<br>Address:<br>Primary Contact:<br>Domiciliary Jurisdiction / Supervisory Authority:<br>Applicable Lines of Business: |
|---|

**II. Filing Requirements for Reinsurer Currently Certified by Another NAIC-Accredited Jurisdiction**

If an applicant for certification has been certified as a reinsurer in an NAIC accredited jurisdiction, the [Commissioner] has the discretion to defer to that jurisdiction’s certification, and has the discretion to defer to the rating assigned by that jurisdiction; i.e., “passporting.”

- a. Has the applicant been certified by an NAIC accredited jurisdiction? (Yes or No) ;  
 [If “Yes”, this state will confirm that the initial or renewal certification has been reviewed by the NAIC Reinsurance Financial Analysis (E) Working Group for passporting purposes.]
- b. If the answer to question II.a. is “No”, please proceed to Section III of this application.
- c. If the answer to question II.a. is “Yes”, the applicant shall provide the information required under Section II for consideration by the Commissioner:

| Citation to State Law / Regulation | Requirements  | Y or N | Reference and Supporting Documents |
|------------------------------------|---|--------|------------------------------------|
|                                    | <b>Status of Domiciliary Jurisdiction:</b><br>The applicant must be domiciled and licensed in a Qualified Jurisdiction, as determined by this state.  |        |                                    |
|                                    | <b>Verification of Certification Issued by an NAIC Accredited Jurisdiction:</b><br>If the applicant is requesting that the Commissioner recognize the certification issued by another NAIC accredited jurisdiction (i.e., passporting), the applicant must provide a copy of the approval letter or other documentation provided to the applicant by such NAIC accredited jurisdiction. At a minimum, this letter must confirm the following information:<br><br>a. Name of state(s) in which applicant is currently certified. |        |                                    |

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|                                    | <p>b. The rating and collateral percentage assigned with respect to the applicant.</p> <p>c. The effective and expiration dates with respect to the certification.</p> <p>d. The lines of business to which the certification is applicable.</p> <p>e. The applicant's commitment to comply with all requirements necessary to maintain certification.</p>  |        |                                    |
|                                    | <p><b>Mechanisms Used to Secure Obligations Incurred as a Certified Reinsurer:</b><br/>                     The applicant must specify the mechanisms it will use to secure obligations incurred as a Certified Reinsurer. If the applicant intends to utilize a multibeneficiary trust for this purpose, the applicant must submit (1) the form of the trust that will be used to secure obligations incurred as a certified reinsurer; and (2) the form of the trust that will be used to secure obligations incurred outside of the applicant's certified reinsurer status, i.e., the applicant's 100% collateralized trust (if applicable). The form of each trust is required to be submitted pursuant to state law in order to ensure that security for these obligations will be kept separate and to ensure that each trust meets the requirements of the state's Credit for Reinsurance statute and/or regulation.</p> |        |                                    |
|                                    | <p><b>Form CR-1 (For Initial and Renewal Applications):</b><br/>                     The applicant must provide Form CR-1, which must be properly executed by an officer authorized to bind the applicant to the commitments set forth in the form.</p>   |        |                                    |
|                                    | <p><b>Other Requirements:</b><br/>                     The applicant must:</p>  |        |                                    |
|                                    |   |        |                                    |
|                                    |   |        |                                    |

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|                                    | <p>a. Commit to comply with other reasonable requirements deemed necessary for certification by the certifying state. Failure to comply with such other requirement could disqualify the reinsurer from certification.</p> <p>b. Provide a statement that the applicant agrees to post 100% security upon the entry of an order of rehabilitation or conservation against the ceding insurer or its estate.</p>   |        |                                    |
|                                    | <p><b>Public Notice Requirement:</b><br/>                     The [Commissioner] is required to post notice on the insurance department's website promptly upon receipt of any application for certification, including instructions on how members of the public may respond to the application.<br/>                     The [Commissioner] may not take final action on the application until at least [insert number of days required in the specific state] days after posting such notice. The [Commissioner] will consider any comments received during the public notice period with respect to this application.</p> |        |                                    |

### **III. Filing Requirements for Full Application**

- a. The applicant shall provide the information required under Section III if:
- i. the applicant has not been certified by an NAIC accredited jurisdiction
  - ii. the Commissioner makes a determination not to recognize or defer to the certification issued by another NAIC accredited jurisdiction; or
  - iii. the applicant is renewing its certification by an NAIC accredited jurisdiction.

b. Check appropriate box:

Initial Application                       Renewal Application

| Citation to State Law / Regulation | Requirements   | Y or N | Reference and Supporting Documents |
|------------------------------------|--|--------|------------------------------------|
|                                    | <p><b>Status of Domiciliary Jurisdiction / Proof of Licensure and Good Standing:</b><br/>                     The applicant must be domiciled and licensed in a Qualified Jurisdiction, as</p> |        |                                    |

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|                                    | <p>determined by this state. The applicant must be in good standing (or the jurisdiction's equivalent classification) and maintain capital and surplus in excess of its domiciliary jurisdiction's highest regulatory action level.</p> <p>The Commissioner will consider the following information with respect to the applicant's domiciliary jurisdiction:</p> <ul style="list-style-type: none"> <li>a. Whether the domestic supervisory authority been approved as a Qualified Jurisdiction in this state.</li> <li>b. Confirmation as to whether the domestic supervisory authority is included on the NAIC List of Qualified Jurisdictions.</li> </ul> <p>The applicant must provide the following information:</p> <ul style="list-style-type: none"> <li>a. A copy of the certificate of authority or license to transact insurance and/or reinsurance from the applicant's domiciliary jurisdiction.</li> <li>b. A certification from the applicant's domestic supervisory authority affirming that the applicant is in good standing (or the jurisdiction's equivalent classification) and maintains capital and surplus in excess of the jurisdiction's highest regulatory action level.</li> </ul> |        |                                    |
|                                    |   |        |                                    |
|                                    | <p><b>Mechanisms Used to Secure Obligations Incurred as a Certified Reinsurer:</b></p> <p>The applicant must specify the mechanisms it will use to secure obligations incurred as a Certified Reinsurer. If the applicant intends to utilize a multibeneficiary trust for this purpose, the applicant must submit (1) the form of the trust that will be used to secure obligations incurred as a certified reinsurer; and (2) the form of the trust that will be used to secure obligations incurred outside of the applicant's certified reinsurer status, i.e., the applicant's 100% collateralized trust (if applicable). The form of each trust is required to be</p>  |        |                                    |

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|                                    | submitted pursuant to state law in order to ensure that security for these obligations will be kept separate and to ensure that each trust meets the requirements of the state's Credit for Reinsurance statute and/or regulation.   |        |                                    |
|                                    | <p><b>Financial Strength Ratings:</b><br/>The applicant must maintain interactive financial strength ratings from two or more acceptable rating agencies. The applicant must provide the following:</p> <ol style="list-style-type: none"> <li>a. Confirm all interactive financial strength ratings currently maintained by the applicant.</li> <li>b. Copies of full rating agency reports with respect to all financial strength ratings currently maintained by the applicant, if available. If a full report is not available, the applicant must provide a letter from the applicable rating agency confirming its current financial strength rating.</li> <li>c. A description of any changes within the last three years in the financial strength rating from an approved rating agency.</li> </ol> <p><b>NOTE:</b> Acceptable rating agencies include A.M. Best, Fitch Ratings, Moody's Investor Service, Standard &amp; Poor's, or any other Nationally Recognized Statistical Rating Organization.</p> |        |                                    |
|                                    | <p><b>Disputed and/or Overdue Reinsurance Claims / Business Practices:</b><br/>The Commissioner may consider the applicant's business practices in dealing with its ceding insurers, including compliance with contractual terms and obligations. The applicant must provide the following if 1) at the individual cedent level, the reinsurer has 10% or more of its reinsurance obligation payable in dispute and/or more than 90 days past due to any of its top 15 individual US cedents, based on amount of reinsurance obligations assumed, or 2) at the aggregate level with respect to U.S. cedents, the reinsurer has</p>   |        |                                    |

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|                                    | <p>claims that are in dispute and/or more than 90 days past due that are 1% or more of its total reinsurance obligations payable to all US cedents:</p> <p>a. A list and description of all reinsurance claims that are in dispute and/or more than 90 days past due regarding reinsurance assumed from U.S. domestic ceding insurers.</p> <p>b. A description of the applicant's business practices in dealing with U.S. ceding insurers, including its record of compliance with reinsurance contractual terms, and a statement that the applicant commits to comply with all contractual requirements applicable to reinsurance contracts with U.S. ceding insurers.</p> |        |                                    |
|                                    | <p><b>Schedules for Reinsurance Assumed and Reinsurance Ceded:</b><br/>The applicant must provide the following:</p> <p>a. For applicants domiciled in the U.S., provide the most recent NAIC Annual Statement Blank Schedule F (property/casualty) and/or Schedule S (life and health).</p> <p>b. For applicants domiciled outside the U.S. provide Form CR-F (property/casualty) and/or Form CR-S (life and health), completed in accordance with the instructions adopted by the NAIC</p>  |        |                                    |
|                                    | <p><b>Regulatory Actions:</b><br/>The applicant must provide a description of any regulatory actions taken against the applicant.</p> <p>a. Include all regulatory actions, fines and penalties, regardless of the amount.</p> <p>b. Provide a description of any changes in with respect to the provisions of the applicant's domiciliary license.</p> <p>[NOTE: Reinsurance-FAWG requires this information for the last three years for</p>   |        |                                    |

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|                                    | passporting purposes.]  |        |                                    |
|                                    | <p><b>Financial/Regulatory Filings:</b><br/>The applicant must provide the following:</p> <p>a. A copy of the most recent report of the independent auditor.</p> <p>b. Copies of the audited financial statements for the last three years. Financial statements must demonstrate that the applicant has minimum capital and surplus, or the equivalent, of at least \$250,000,000. If the applicant is an association including incorporated and individual unincorporated underwriters, statements must demonstrate that the applicant has capital and surplus equivalents (net of liabilities) of at least \$250,000,000, and a central fund containing a balance of at least \$250,000,000. Please note the following requirements with respect to these financial statements:</p> <ul style="list-style-type: none"> <li>• Audited U.S. GAAP basis statements must be submitted if available.</li> <li>• Audited IFRS basis statements are acceptable but must include an audited footnote reconciling equity and net income to a U.S. GAAP basis.</li> <li>• With the permission of the Commissioner, an applicant may be allowed to submit audited IFRS basis statements with reconciliation to U.S. GAAP certified by an officer of the applicant.</li> <li>• Upon the initial certification, the Commissioner may consider audited financial statements for the last three years as filed with the applicant’s non-U.S. jurisdiction supervisor. If the Commissioner accepts such statements in the initial filing, the applicant must acknowledge and commit that future financial statement filings</li> </ul> |        |                                    |

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|------------------------------------|--|--------|------------------------------------|
|                                    | <p>will include the appropriate reconciliation to a U.S. GAAP basis, as indicated above.</p> <p>c. A copy of the Actuarial Opinion and other regulatory filings, as filed with the applicant's domiciliary supervisor. [NOTE: Reinsurance-FAWG requires a stand-alone Actuarial Opinion for passporting purposes.]</p>   |        |                                    |
|                                    | <p><b>Solvent Schemes of Arrangement:</b><br/>The applicant must provide:</p> <p>a. A description of any past, present or proposed future participation in any solvent scheme of arrangement, or similar procedure, involving U.S. ceding insurers.</p> <p>b. A statement that the applicant commits to notify the commissioner of any future proposed participation in any solvent scheme of arrangement, or similar procedure, as soon as practicable.</p> |        |                                    |
|                                    | <p><b>Form CR-1 (For Initial and Renewal Applications):</b><br/>The applicant must provide [insert name of state] Form CR-1, which must be properly executed by an officer authorized to bind the applicant to the commitments set forth in the form.</p>  |        |                                    |
|                                    | <p><b>Other Requirements:</b><br/>The applicant must:</p> <p>a. Commit to comply with other reasonable requirements deemed necessary for certification by the certifying state.</p> <p>b. Provide a statement that the applicant agrees to post 100% security upon the entry of an order of rehabilitation or conservation against the ceding insurer</p>  |        |                                    |
|                                    |  |        |                                    |
|                                    |  |        |                                    |



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|                                    | or its estate.  |        |                                    |
|                                    | <p><b>Public Notice Requirement:</b><br/>                     The [Commissioner] is required to post notice on the insurance department’s website promptly upon receipt of any application for certification, including instructions on how members of the public may respond to the application.<br/>                     The [Commissioner] may not take final action on the application until at least [insert number of days required in the specific state] days after posting such notice. The [Commissioner] will consider any comments received during the public notice period with respect to this application.</p> |        |                                    |

Applicable law [33-2-1216](#)

Credit for Reinsurance Regulation

FORM CR-1

CERTIFICATE OF CERTIFIED REINSURER

I, \_\_\_\_\_, \_\_\_\_\_  
(name of officer) (title of officer)

of \_\_\_\_\_, the assuming insurer  
(name of assuming insurer)

under a reinsurance agreement with one or more insurers domiciled in \_\_\_\_\_,  
in order to be considered for approval in this state, hereby certify that (name of state)

\_\_\_\_\_ (“Assuming Insurer”):  
(name of assuming insurer)

1. Submits to the jurisdiction of any court of competent jurisdiction in \_\_\_\_\_  
(ceding insurer’s state of domicile)

for the adjudication of any issues arising out of the reinsurance agreement, agrees to comply with all requirements necessary to give such court jurisdiction, and will abide by the final decision of such court or any appellate court in the event of an appeal. Nothing in this paragraph constitutes or should be understood to constitute a waiver of Assuming Insurer’s rights to commence an action in any court of competent jurisdiction in the United States, to remove an action to a United States District Court, or to seek a transfer of a case to another court as permitted by the laws of the United States or of any state in the United States. This paragraph is not intended to conflict with or override the obligation of the parties to the reinsurance agreement to arbitrate their disputes if such an obligation is created in the agreement.

2. Designates the Insurance Commissioner of \_\_\_\_\_  
(ceding insurer’s state of domicile)

as its lawful attorney upon whom may be served any lawful process in any action, suit or proceeding arising out of the reinsurance agreement instituted by or on behalf of the ceding insurer.

3. Agrees to provide security in an amount equal to 100% of liabilities attributable to U.S. ceding insurers if it resists enforcement of a final U.S. judgment or properly enforceable arbitration award.

4. Agrees to provide notification within 10 days of any regulatory actions taken against it, any change in the provisions of its domiciliary license or any change in its rating by an approved rating agency, including a statement describing such changes and the reasons therefore.

5. Agrees to annually file information comparable to relevant provisions of the NAIC financial statement for use by insurance markets in accordance with [cite relevant provision of the state equivalent of the Credit for Reinsurance Model Regulation].

6. Agrees to annually file the report of the independent auditor on the financial statements of the insurance enterprise.

7. Agrees to annually file audited financial statements, regulatory filings, and actuarial opinion in accordance with [cite relevant provision of the state equivalent of the Credit for Reinsurance Model Regulation].

8. Agrees to annually file an updated list of all disputed and overdue reinsurance claims regarding reinsurance assumed from U.S. domestic ceding insurers.

9. Is in good standing as an insurer or reinsurer with the supervisor of its domiciliary jurisdiction.

Credit for Reinsurance Model Regulation

Dated: \_\_\_\_\_

\_\_\_\_\_  
(name of assuming insurer)

BY: \_\_\_\_\_  
(name of officer)

\_\_\_\_\_  
(title of officer)