



STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAI'I
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
KA 'OIHANA PILI KĀLEPA
INSURANCE DIVISION
335 MERCHANT STREET, ROOM 213
HONOLULU, HAWAII 96813



REGISTER OF TRAVEL RETAILERS

Pursuant to Act 256, all limited lines travel insurance producers must establish and maintain a register of each travel retailer offering travel insurance on behalf of the limited lines travel insurance producer. The register must include the name, address, and contact information of the travel retailer and an officer or person who directs or controls the travel retailer's operations, and the travel retailer's federal tax identification number.

I, _____ (name), as _____ (title) of
_____ (business name), a licensed limited lines travel insurance
producer in the State of Hawaii, hereby acknowledge that Attachment A is a complete and accurate
register of travel retailers offering travel insurance on behalf of _____ (business name)
as of _____ (date).

By signing below, I certify that all travel retailers indicated on Attachment A are in full
compliance with title 18 United States Code section 1033.

Signature: _____

Printed Name: _____

Business Name: _____

Title (please print): _____

Date: _____



STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAI'I
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
KA 'OIHANA PILI KĀLEPA
INSURANCE DIVISION
335 MERCHANT STREET, ROOM 213
HONOLULU, HAWAII 96813



TRAVEL RETAILER REGISTER

Travel Retailer Information					Director or Controller			
Name	Mailing Address	Email	Phone	Federal Tax ID Number	Name	Address	Email	Phone

*** This register shall be submitted to inslic@dcca.hawaii.gov only upon request by the Insurance Commissioner.