Application for Adjuster's License

(Pursuant to the *Insurance Act* R.S.P.E.I 1988, Cap. I-4)

Financial and Consumer Services Division
Department of Justice and Public Safety
105 Rochford Street, 1st Floor Shaw Building
P.O. Box 2000
Charlottetown, PE C1A 7N8
Tel: 902 368 4550

Click here for

Online Web Submission

1. Personal Identification / Qualification Information *(PLEASE PRINT)*
Last name (Legal name)

2. First name (Legal name)	Middle name(s) (in full)	Preferred name if different

3. Have you **ever** been known by another name, legal or otherwise?
☐ No ☐ Yes If yes, please print name here

4. Birth Date			Sex			
Y Y Y Y	M M	D D	**M** ☐	**F** ☐	Prefer Not to Say ☐	

5. Home Address Street Name and Number, Suite, etc.			Home Telephone ( )
			Home Fax (If applicable) ( )
City/Town	Province	Postal Code	E-mail (if applicable)
6. Business Name and Address Street Name and Number, Suite, etc.			Business Telephone and extension (if applicable) ( )
			Business Fax (If applicable) ( )
City/Town	Province	Postal Code	Business E-mail (if applicable)

7. Address for correspondence: Home ◯ Business ◯

8. Consent to the Collection, Use and Disclosure of Information

I hereby consent to the collection, by the licensing authority, of such personal information and such additional information about me, as may be necessary in order to complete or verify the information contained on the application form and to determine if I am qualified to have a license as an insurance adjuster.

The legal authority for the collection of this information is provided by the legislation and regulations governing the licensing and regulation of insurance adjusters by the Insurance Act, R.S.P.E.I. 1988, Capt. 1-4.

I further authorize and consent to the licensing authority conducting a licensing check and the obtaining from any licensing authority the details of licensing status and details of any disciplinary proceedings against me for breaches under any licensing legislation, rules or by-laws as well as any investigations that are outstanding against me under such legislation, rules or by-laws.

I further and specifically authorize and consent to the licensing authority conducting a criminal record check, and the obtaining from any law enforcement agency the details of any convictions or findings of guilt against me for any offences under federal or provincial legislation as well as any charges that were or are outstanding against me under such legislation.

I further authorize any law enforcement agency to release to the licensing authority such details of convictions and outstanding charges as aforesaid and this form shall be their good and sufficient warrant, discharge and authority for doing so.

I further consent to the licensing authority obtaining any information about me from any credit bureau or from any other credit information source, as permitted by law in any jurisdiction in Canada or elsewhere.

And I furthermore authorize the licensing authority to disclose any of this information to a sponsoring company, other licensing authorities and regulators or law enforcement agencies.

Signature of Applicant	Date Y Y Y Y	M M	D D

9. License Requested and Qualifications

I am applying for the following license: (Check one box only)

☐ Probationary Adjuster License (issued for MAXIMUM of 5 years) ☐ Full Adjuster License

Note: Applicants for a probationary license must complete the attached Supervision Undertaking

10. Do you hold an adjuster's license in your home jurisdiction?

☐ No ☐ Yes If yes, please provide license number _____

Note: Please provide a copy of your insurance adjuster's license from your home jurisdiction (if other than PEI)

11. Qualifications required by candidates applying for a new license are outlined in the Adjuster Licensing Information attachment.

12. Employment History for The Past Five Years (Include months, years and periods of unemployment)

Employer's Name	Date		Position Held	Reason for Leaving
	From (yy/mm)	To (yy/mm)		

Disciplinary Action, Bankruptcy, Judgements and Civil Proceedings

13. Have you **ever** had a license or registration to deal with the public refused, revoked, suspended or cancelled or subject to any restrictions or conditions?

☐ No ☐ Yes If yes, please attach details

14. Do you have any other occupation or employment other than as an insurance adjuster?

☐ No ☐ Yes If yes, please attach details

15. Have you **ever** been successfully sued or has a complaint **ever** been made against you to a regulatory body in any province, territory, state, or country that was or is, based in whole or in part, on fraud, theft, deceit, misrepresentation, forgery, or similar conduct; or based in whole or in part, on professional negligence or misconduct (including claims paid by your errors and omissions insurance carrier or bonding company)?

☐ No ☐ Yes If yes, please attach details

16. Have you ever been subject to discipline or are you currently the subject of an investigation by a regulatory authority in this jurisdiction or elsewhere?

☐ No ☐ Yes If yes, please attach details

17. Have you **ever** been declared bankrupt or made a voluntary assignment in bankruptcy or are you currently an undischarged bankrupt?

☐ No ☐ Yes

If yes, attach details, including trustee's name and address, location of bankruptcy filing, assignment of bankruptcy or receiving order, statement of affairs, and an explanation as to the circumstances of the bankruptcy.

18. Have you **ever** been an officer or director or a controlling shareholder in a corporation or partnership that made a voluntary assignment in bankruptcy or is currently an undischarged bankrupt?

☐ No ☐ Yes If yes, please attach details as in question 17

19. Are you currently a defendant in any civil proceeding or are there any unsatisfied judgements imposed by a civil court, in Canada or elsewhere, against you personally or against a business in which you have an interest of at least ten percent?

☐ No ☐ Yes If yes, please attach details

20. Have you **ever** applied for a surety bond or fidelity bond and been refused or have you ever had a surety bond or fidelity bond revoked?

☐ No ☐ Yes If yes, please attach details

21. Have you **ever** been convicted or charged, or are you currently charged with any offence under any law of any province, territory, state or country, or are you currently the subject of any charges?

☐ No ☐ Yes If yes, please attach details

22. Has any partnership or company of which you are or were at the time of such an event a partner, officer, director or shareholder, **ever** pleaded guilty or been found guilty, or is any such partnership or company currently the subject of a charge or indictment, under any law of any province, state or country for contraventions, offences or other conduct relating to the business of insurance?

☐ No ☐ Yes If yes, please attach details

23. Have you **ever** had an employment or business relationship terminated for breach of confidentiality, breach of trust, fraud, misappropriation of funds, theft, forgery, sexual harassment, or physical assault?

☐ No ☐ Yes If yes, please attach details

24. Declaration/Attestation

- I, the undersigned applicant, certify that the information given by me in this application is true and complete to the best of my knowledge and belief and hereby undertake to notify the licensing authority in writing of any material change.
- I agree that by signing this application I accept responsibility for these answers and undertakings.
- I understand and will comply with the laws governing the license I am applying for in Prince Edward Island.

Signature of Applicant	Date		
	Y Y Y Y	M M	D D

Supervision Undertaking

Pursuant to *Section 4 of the Insurance Adjusters Regulations*

I, _____, being the holder of a full adjuster's license
Supervising Licensee Name
in Prince Edward Island under the *Insurance Act R.S.P.E.I. 1988, Cap. I-4*, undertake to supervise

_____ during the term of their probationary license.
Probationary Licensee Name
I agree to review, and countersign all claim reports or settlement offers completed or submitted by the probationary licensee.

I, _____ acknowledge that:
Probationary Licensee Name

a) I may act as an adjuster only under the supervision of the supervising licensee named above; and
b) the supervising licensee must review, and countersign all claim reports or settlement offers I complete or submit.

If this agreement is terminated by either party, the probationary licensee and the supervising licensee must ***immediately*** provide written notice of the termination and the reason for it to the licensing authority.

_____	_____
Full Licensee Signature	Probationary Licensee Signature
_____	_____
Full Licensee Name (Printed)	Probationary Licensee Name (Printed)
_____	_____
Full Licensee PEI License Number	Probationary Licensee PEI License Number *(if applicable)*
_____	_____
Date	Date

Adjuster Licensing Information

Both probationary and full adjuster's licenses are issued for a two-year term.

Non-resident applicants licensed in their home jurisdiction must provide a copy of their insurance adjuster's license from their home jurisdiction.

Applicants for a full license who do not hold a full license in their home jurisdiction must provide a transcript confirming that the minimum educational requirements outlined below are met.

All probationary licensees must be supervised by a licensee with a full license in PEI. The supervising licensee must review, and countersign all claims reports and settlement offers completed or submitted by the probationary licensee. Both the supervising and probationary licensee must sign a Supervision Undertaking detailing this relationship.

To obtain a full license, the probationary licensee must complete C11 (or C81 and C82 as an equivalent) of the Insurance Institute of Canada syllabus during their initial year of being licensed. To obtain a full license a probationary licensee must have two years practical experience and complete eight courses from the Insurance Institute of Canada syllabus within five years. There are five mandatory courses:

- C11 (or C81 and C82 as an equivalent)
- C14
- C32
- C110 (or C17 as an equivalent)
- C111 (or C46 as an equivalent)

The licensing fees for a full or probationary license is $200.

Probationary licenses can be held for a MAXIMUM of 5 years. Probationary licencees are expected to complete the required educational courses to obtain a full license within 5 years.