



CERTIFICATE OF ASSUMED BUSINESS NAME

LICENSING

602-364-4457 | [insurancelicensing@difi.az.gov](mailto:insurancelicensing@difi.az.gov)

**Make sure no one else is using a name that is substantially similar to the name you wish to use:**

- To find out if another licensee is using a substantially similar name, visit the department's website online at <https://difi.az.gov>. Hover over the "General Information" tab then over "Learn About Insurance" then click "Find A Producer (License Search)".
- To find out if anyone has *registered* a substantially similar name, visit the Arizona Corporation Commission's website online at <http://ecorp.azcc.gov>. Use the "eCorp" search option to conduct your search.

1. If this certificate is for an individual or business that already has an Arizona insurance license, enter the license number; otherwise leave blank .....	AZ INSURANCE LICENSE NUMBER	
2. Is the person seeking to use the assumed business name a BUSINESS ENTITY or an INDIVIDUAL? <input type="checkbox"/> BUSINESS ENTITY ( <i>Go to #3</i> ) <input type="checkbox"/> INDIVIDUAL ( <i>Skip #3; go to #4</i> )		
3. Enter the (genuine/legal) name of the business entity ( <i>skip #4 and go to #5</i> )		
4. Genuine/legal ("FULL") Last Name	FULL First Name	FULL Middle Name
5. If you want an <i>existing</i> assumed name removed from your license, <i>enter that name here</i>		
6. If you want an assumed name added to your license, <i>enter that name here</i> .		

**ACKNOWLEDGMENT AND CERTIFICATION**

As the person conducting or intending to conduct insurance under the assumed name on this certificate, or as the designated responsible producer (DRLP) of a firm or corporation (business entity) that is conducting or intends to conduct insurance under the assumed name on this certificate, by my signature below, I hereby acknowledge and certify that:

- 1) THIS FORM DOES NOT CONSTITUTE AN INSURANCE LICENSE. If I establish and intend to sell, solicit or negotiate insurance through a firm or corporation that uses the name shown on this form, I understand that the firm or corporation must apply for and be issued an Arizona insurance license prior to conducting insurance business in Arizona.
- 2) The Director of Insurance may deny the use of an assumed business name, require the use of a different assumed business name or require the use of an assumed business name if either:
  - the name is so similar to that of any firm, corporation or other entity already licensed or using a duly filed assumed name that use of the name pursuant to this certificate may cause uncertainty or confusion; or,
  - the name would tend to deceive or mislead the public as to the nature of the business that is or will be conducted.
- 3) The licensee must notify the Department of Insurance in writing within 30 days after any material change to the information provided on this form.
- 4) Filing this certificate does not legally reserve the assumed business name as a trade name.  
**NOTE:** You can reserve a trade name with the Arizona Secretary of State. If you received a Trade Name Certificate from the Arizona Secretary of State, please *attach it to this certificate*. If you do not register your name with the Arizona Secretary of State and we receive a license application from a person whose genuine name or trade name is substantially similar to your assumed name, we may require you to stop using the assumed name.

SIGNATURE _____	DATE _____
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