STATE OF TENNESSEE
DEPARTMENT OF COMMERCE AND INSURANCE
Insurance Division – Agent Licensing
500 James Robertson Parkway
Nashville, TN 37243-1134
615 741-2693

LICENSING PROCEDURES
FOR AUTOMOBILE CLUB AGENTS (MOTOR CLUB AGENTS)

Requirements for an Automobile Club (Motor Club) Agent License

(1) Completed, signed and notarized application
(2) $20.00 filing fee
(3) Representative of the Club must sign and certify page 3 of application
(4) Applicant must hold a current insurance license with the State of Tennessee OR provide a Personnel Selection Report/Criminal Background Check with application for licensure
(5) Note: All Automobile Club Agent licenses will expire annually on June 30

Duplicate License
The commissioner may issue a duplicate license for any lost, stolen or destroyed license upon receipt of an affidavit of the licensee, concerning the facts of such loss, theft or destruction.

Fees
(1) Application Filing Fee - $20.00
(2) Automobile Club Agent Renewal Fee - $20.00

Termination of Agent from Automobile Club
(1) Automobile Club must file a Termination Affidavit for Auto Club Agent License form
(2) Affidavit must be completed and signed by a representative of the Auto Club
(3) Form must be notarized

Request for Forms
Forms may be found on our website: www.tn.gov/commerce/insurance or send self-addressed postage paid Envelope with request to:
Tennessee Department of Commerce and Insurance
Agent Licensing Section
500 James Robertson Parkway
Nashville, TN 37243-1134

NOTE: BY DEPARTMENTAL REQUEST, PLEASE ENCLOSE MONEY ORDER, CERTIFIED CHECK OR CASHIERS CHECK FOR LICENSING FEES.

Rev. 10/12
APPLICATION

For Agent’s Representative’s License to Solicit
Automobile Club or Association Memberships
(Must be printed or typed)

1. Name of Applicant: _________________________________________________________________
   First                               Middle                               Last

2. Resident Address:  __________________________________________________________________
   Physical Street Address                                    City                    State                Zip            County

   Business Address:  __________________________________________________________________
   Physical Street Address                                    City                    State                Zip            County

   Home Phone Number:____________________  Business Phone Number:_______________________

3. SSN#____________________________Date of Birth________________  Male_____   Female_____

4. Are you a United States citizen?  Yes_____  No_____
   Non-citizens must provide two forms of documentation of identity and immigration status.

5. Occupation and place of business for the past five years (attach separate sheet if needed):

   ________________________________________________________________________________

   ________________________________________________________________________________

   ________________________________________________________________________________

   ________________________________________________________________________________

   ________________________________________________________________________________

6. Has applicant ever held a license to solicit automobile club or association memberships in Tennessee? Yes_____  No_____ If yes, state when licensed, ID number, and name of club or association.

   ________________________________________________________________________________

7. Does applicant hold a current Tennessee Insurance Producer’s license? Yes____  No____  If yes, state when licensed, producer ID number, and name of insurance carrier.

   ________________________________________________________________________________

8. Has applicant ever held a license to solicit automobile club or association memberships or insurance contracts in any state other than Tennessee? Yes____  No____  If yes, state when licensed, state and name of insurance carrier.

   ________________________________________________________________________________
9. Has applicant ever been refused or had suspended or revoked a license to solicit automobile club, association memberships or insurance in any state? Yes____ No____ If yes, give full explanation.

_____________________________________________________________________________
_____________________________________________________________________________

10. Has applicant ever been convicted of, or are currently charged with a criminal offense? 
Yes____ No____ If yes, complete detail below and enclose copies of legal documentation and a written statement regarding offense(s).

Date of Offense_________________ Offense______________________________________________

Time served in any penal institution: From ____________ to _______________ If more than one offense, list each offense separately.

_____________________________________________________________________________
_____________________________________________________________________________

11. Name of current employer: ______________________________________________________

12. Automobile Club or Association you are making application to represent: _________________

_____________________________________________________________________________

I hereby certify upon my oath that all my answers supporting this application are true. Permission is granted to furnish the Tennessee Department of Commerce and Insurance a copy of the Personnel Selection Report.

______________________________            ______________________ 
Signature of Applicant                                                Date

State_________________________ 
County______________________

Subscribed and sworn to before me
this _____ day of______________, 20___

__________________________________________
Notary Public

My commission expires_____________________

NOTE:
APPLICATION WILL NOT BE PROCESSED WITHOUT PROPER NOTARIZATION

page 2
To The Commissioner of the Department of Commerce and Insurance, State of Tennessee

In support of the attached application of ____________________________

name of applicant

for a license to solicit automobile memberships, ____________________________

name of automobile club or association

_________________________, hereby certifies that:

1. The applicant is a resident of the state of ___________________ and is at least 18 years of age.

2. The applicant is personally known to the official of the automobile club or association making this certification.

3. ____________________________ has investigated the character and background of the applicant

and is satisfied that he or she is trustworthy and qualified to act as a representative to solicit

memberships in our automobile club or association in the State of Tennessee.

4. The applicant has read and is familiar with Title 55, Chapter 18, Automobile Clubs and

Associations, Tennessee Code Annotated.

Issued this ________ day of ______________, 20____

____________________________________________

Name of Club or Association

____________________________________________

Address of Automobile Club or Association

____________________________________________

Phone Number

By: ___________________________________________________

Name and Official Title

NOTE:

Unless applicant holds a current insurance producer license as a resident in the State of Tennessee, a

PERSONNEL SELECTION REPORT must be attached to this application.
AUTO CLUB AGENT LICENSE TERMINATION AFFIDAVIT
(To be completed by Motor Club Only)

RE: ____________________________________________________________
    (Name of Agent)                                                 (License Number)

This Affidavit is to serve as written notification that ___________________________________________
    (Name of Motor Club)

has made every effort to recover the original license(s) of the above referenced (or attached listing of)
terminated Motor Club Agent(s) by contacting the Agent(s).

We are unable to return the original license(s) for the following reason:

_____ License not available at Branch Office
_____ Agent cannot locate original license
_____ No response to request / mail returned / no forwarding address
_____ License attached

___________________________________________
Signature of Motor Club Representative

___________________________________________
Title

State________________
County______________

Subscribed and sworn to before me

this _____ day of ___________________, 20___

___________________________________________
Notary Public

My commission expires_____________________

(revised 08-03-2004)