

**FORM 5**  
**APPOINTMENT OF REPRESENTATIVE RESIDENT (AGENT) FOR SERVICE OF PROCESS**

*(Ref: Subsection 1(c) of Section 302 of 37 FSMC) – Licensure*  
*(Ref: Section 1(d) of Section 307 of 37 FSMC) – Registration*  
*(Ref: Section 503 of 37 FSMC)*

KNOW ALL MEN BY THESE PRESENTS:

That pursuant to the applicable provision of 37 FSMC as referenced above, the (name and address of applicant in the FSM), and as authorized to carry on the business of insurance in the Federated States of Micronesia and as authorized by law (hereinafter called the “Insurer”) does hereby:

- 1). Designate and appoint (Name of Representative Resident) and having (Complete address and contact details, including email address), in the Federated States of Micronesia as the said insurer’s Representative Resident for Service of Process (hereinafter called the “Representative”);
- 2). Authorize the Representative to accept service of any notice, order or process in any action or proceeding brought or pending in the Federated States of Micronesia upon any cause of action arising in or growing out of insurance business transacted in the Federated States of Micronesia; such authorization to be valid until such time as it shall be revoked by a notice in writing filed with the Insurance Commissioner;
- 3). Stipulate and agree that after being admitted to transact business in the Federated States of Micronesia, it will continue to comply with the requirements as to its business set forth in Title 37 of FSM Code and other laws of the Federated States of Micronesia; and
- 4). Stipulate and agree that before retiring from business in the Federated States of Micronesia, it will reinsure its Federated States of Micronesia business with an insurer under a plan submitted to and approved by the Insurance Commissioner.

This appointment and designation, and the powers delegated hereunder, shall terminate without notice to the appointee upon the filing with the Insurance Board or Commission of a document appointing another person as Representative Resident for the said Insurer pursuant to relevant and applicable provision(s) in 37 FSMC.

IN WITNESS WHEREOF, The said insurer has to these presents caused its name to be subscribed and attested by its President and Secretary at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_\_.

By \_\_\_\_\_ Attest \_\_\_\_\_  
(President) (Secretary)

\_\_\_\_\_  
(Print Name) (Print Name)

On \_\_\_\_\_ before me, \_\_\_\_\_, personally appeared \_\_\_\_\_ and subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person and/or entity on behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

[NOTARIAL SEAL]

Signature \_\_\_\_\_  
(Signature of Notary Public)

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I, \_\_\_\_\_, the appointee named above do hereby certify under penalty that I am the individual named therein, that I maintain an office or residence at the address shown thereon, and that I shall be reasonably available during normal business hours at such place for service on me for the appointing company of papers, notice, proofs of loss, summons, writs or other process. I further agree that in the event the address or location of my said office or residence is changed during the existence of this appointment, I will promptly give notice thereof in writing to the Insurance Commissioner and to the appointing company.

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal)

\_\_\_\_\_  
(Notary Public Signature)