REPLACED REGISTER JULY, 1959 by 29 thru 77

WISCONSIN ADMINISTRATIVE CODE

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Chapter Ins 7

FORMS

Ins 7.01 Forms

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Ins 7.01 Forms. The following forms have been adopted by the commissioner of insurance:

| Title of Form | Form No. |
|--|--|
| Accident and Health Policy Experience Exhibit | 22-18 |
| Accident and Sickness Insurance Advertising Rules—Form for Certifying Compliance With | |
| Adjusters Instruction Sheet—Fire License License—Application for Report to the Wisconsin State Fire Marshal Amendments to Articles of Organization of Domestic Insur- ance Companies—Form of | 12–1 12–2 31–1 |
| Amendments to Articles of Organization of Town Mutual In- surance Companies—Form of | |
| Annual Report Employe Welfare Funds Firemen's Associations | 71–6 28–1 |
| Annual Statement Assessment Life and Accident Associations Employe Welfare Funds Fire and Casualty Insurance Companies Fraternal Benefit Societies Hospital and Medical Service or Indemnity Corporations Life and Accident and Health Companies Title and Mortgage Guaranty Companies Town Mutual Insurance Companies | $\begin{array}{c} 22-51\\ 71-9\\ 22-11\\ 22-31\\ 22-61\\ 22-41\\ 22-71\end{array}$ |
| Application for License—Insurers Fire and CasualtyLife | |
| Appointment of Commissioner of Insurance as Attorney for Service of Process Company | 21–3 |
| Appointment of General or State Agent By-Laws and Amendments Thereof of Domestic Insurance | 21–5 |
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| Complaints-Requirements | 51-11 |

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| Annual Statement | 71 - 9 |
| Instructions | |
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| Application for Temporary Permit | 11-1 |
| License—Nonresident | 11 - 3 |
| License—Resident | 11 - 2 |
| Lost License Certificate | 11 - 8 |
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| Reinsurance Assumed from Companies Not Licensed in | n |
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The above forms may be obtained from the Commissioner of Insurance, State Capitol, Madison, Wisconsin.

History: 1-2-56; am. Register, September, 1958, No. 33, eff. 10-1-58.

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