

**IMMEDIATE RESPONSE REQUIRED**

**NEBRASKA SURPLUS LINES TAX FILING**

**THE FOLLOWING INFORMATION MUST BE RETURNED TO THIS OFFICE IMMEDIATELY SO THE PROPER SURPLUS LINES FILINGS CAN BE COMPLETED.**

**THE NEBRASKA INSURANCE DEPARTMENT REQUIRES THE INSURED TO PROVIDE IN WRITING HIS OR HER PERMISSION FOR SUCH INSURANCE TO BE WRITTEN IN A NON-ADMITTED INSURER. STATUTE 44-5510**

NAMED INSURED: \_\_\_\_\_

POLICY NO: \_\_\_\_\_

I, \_\_\_\_\_, acknowledge and grant permission for my insurance to be written in a non-admitted insurer. This policy will be issued by a non-admitted insurer and in the event of the insolvency of such insurer, this policy will not be covered by the Nebraska Property and Liability Insurance Guaranty Association.

\_\_\_\_\_ Signature of Insured

\_\_\_\_\_ Date of Permission