

Re ARS § 20- 407(B) : Form to certify status as an industrial insured.

To: _____
(Complete Name of Broker)

I, _____(your name) certify that:

1. I am _____(owner or an officer) of _____(name of industrial insured as it will appear on the insurance policy to be issued by the above-named insurer).

2. I have read and understand A.R.S. § 20-401.07(A)(1) set forth below;

“Industrial insured” means an insured that applies for or procures any insurance that is subject to Article 4.1 of this chapter through the use of a risk manager and that meets at least two of the following criteria:

- Has aggregate annual gross premiums for insurance on all property and casualty risks that are subject to Article 4.1 of this chapter totaling at least one hundred thousand dollars as of the preceding fiscal year end of the industrial insured.
- b. Possesses a net worth of over ten million dollars as of the preceding fiscal year end of the industrial insured as verified by a certified public accountant.
- c. Has net revenues or sales exceeding twenty-five million dollars as of the preceding fiscal year end of the industrial insured as verified by a certified public accountant.
- d. Has more than eighty full-time employees or equivalent per individual company or one hundred full-time employees or equivalent per holding company system as of the date of the policy is issued.

3. _____(name of industrial insured) is an industrial insured pursuant to A.R.S. § 20-401.07 and meets the statutory criteria checked above (check all that apply in number two).

CERTIFICATION

STATE OF: _____)
COUNTY OF: _____)

Being first duly sworn, _____deposes and says that he/she has read the foregoing, and each statement and answer made, and under penalty of perjury, swears that all such answers are true and correct.

Full **Signature** of Officer or Owner
(Include **FULL first, middle and last names**)

SUBSCRIBED AND SWORN TO before me this _____day of _____, _____.

Notary Public (SEAL)