



STATE OF MAINE
 DEPARTMENT OF PROFESSIONAL
 AND FINANCIAL REGULATION
BUREAU OF INSURANCE
 34 STATE HOUSE STATION
 AUGUSTA, MAINE
 04333-0034

Change of Supervising Entity Form Portable Electronic Device Vendors & Self-storage Providers

Pursuant to 24-A M.R.S. § 7004(1)(B) and § 7504(1)(B) the insurer issuing either portable electronic device (PED) insurance or self-storage insurance must supervise the administration of the sale of insurance. The supervision may be by the insurer directly or by a supervising entity licensed as a producer business entity or insurer.

PED Vendor or Self-storage Provider Name: _____

FEIN #: _____ Maine License #: _____

Name of New Supervising Entity	Maine License #	NPN # (if applicable)

Person Completing This Form: _____

Title and Employing Insurer: _____

Phone #: _____ Email address: _____

There is **no fee** to change a supervising entity.

If you have any questions, please contact 207-624-8475 or e-mail insurance.pfr@maine.gov

Revised: August 2021



PRINTED ON RECYCLED PAPER

OFFICES LOCATED AT 76 NORTHERN AVENUE, GARDINER, MAINE 04345
www.maine.gov/insurance

Phone: (207) 624-8475 (Office)

TTY: 1-888-577-6690

Consumer Complaints: (800) 300-5000

Fax: (207) 624-8599