

Title Insurance Licensing Biographical Information

When sending this form with an application for a title insurance agent or direct operation license (Form FINT143), complete a separate FINT08 form for each individual listed for your business type.

- For a sole proprietorship, the sole proprietor and each designated on-site manager.
- For a partnership, each designated on-site manager and partner who is in control.
- For an entity, each officer, director, limited liability company manager, designated on-site manager, and person who is in control of the entity.
- Each controlling person of an entity or partnership who is in control of the entity or partnership applicant.

Tell us about the title insurance agent or direct operation you are filling out this form for

Name of the title insurance agent or direct operation _____

Texas Department of Insurance (TDI) license number (if they have one) _____

Firm ID number (if they have one) _____

Federal tax identification number _____

Tell us about yourself

Section 1: Name, address, and position

Legal name _____

Social Security number _____ Date of birth _____

Home address (must be physical address) _____

City _____ State _____ ZIP _____

Positions you hold related to this title insurance agent or direct operation (**check all that apply**).

- | | | | |
|--------------------------------------|-----------------------------------|---|--------------------------------------|
| <input type="checkbox"/> Shareholder | <input type="checkbox"/> Member | <input type="checkbox"/> Partner | <input type="checkbox"/> LLC Manager |
| <input type="checkbox"/> Officer | <input type="checkbox"/> Director | <input type="checkbox"/> Designated on-site manager | |

During the past 5 years, were you a manager (or comparable position) of a Texas title insurance agent or direct operation?

- If yes:** 📎 Attach a resume that shows proof that you were a manager (or comparable position) of a Texas title insurance agent or direct operation.
- If no:** 📎 Attach a certificate of completion for a management training course, as outlined in Procedural Rule P-28.IV.A of the [Title Insurance Basic Manual](#).

Section 2: Questions about legal offenses

When answering the following question: (1) include any offense filed against you in Texas, any other state, or by the federal government; and (2) do not include traffic violations and first offense DWI (driving while intoxicated or under the influence).

1. Do you have pending misdemeanor or felony charges (by indictment, information, or any other instrument)? Yes No
2. Have you been convicted of any misdemeanor or felony offense? Yes No
3. Have you had adjudication deferred on any misdemeanor or felony charge or offense? Yes No
4. Have you served probation for any misdemeanor or felony offense? Yes No

📎 **If you answered “Yes” to any question in Section 2, attach one of the following:**

- a. certified copy of: (1) the indictment or charging document, (2) conviction, (3) order deferring adjudication, and/or (4) judgment and conditions of probation from the appropriate jurisdiction. This is needed for each crime or offense.

or

- b. statement that explains that you already sent information about the crime or offense to TDI.

You can also send letters of recommendation and a resume with these attachments.

Section 3: Questions about licenses, litigation, and more

1. Have you, or has any corporation, partnership, association, or firm in which you were a director, officer, shareholder, manager, member, or partner, been any of the following:
 - the subject of an administrative or legal action filed by Texas or another state’s insurance department or financial regulatory agency?
 - the subject of an action filed on behalf of any state or by the federal government based on alleged violations of state or federal insurance, securities, or financial regulatory laws? Yes No
2. Have you had an agency contract or appointment canceled for cause such as a misrepresentation or misappropriation?
 Yes No

3. Have you had a professional license, or an insurance license denied, suspended, or revoked in Texas or any other state?
 Yes No
4. Have you had any judgments against you held by an insurance company or insured person or business that are unpaid in whole or in part?
 Yes No
5. Have you had any judgments against you that involved a violation of the Texas Insurance Code or the insurance laws of any other state?
 Yes No
6. Have you ever applied for a letter of consent, as required under section 18 U.S.C. 1033(e), from any insurance regulatory official from Texas or any other state?
 Yes No
 - **If yes:** 📎 Attach a statement that gives details about the proceeding's outcome and all supporting documents.
 - **If no and you have been convicted of (1) any criminal felony involving dishonesty or breach of trust, or (2) an offense under section 18 U.S.C. 1033:** 📎 Attach a statement that gives details about the proceeding's outcome and all supporting documents.

📎 **If you answered "Yes" to any question in Section 3, attach a statement with dates and details.**

Fingerprint background check

Most people must: (1) get a fingerprint background check, and (2) send us a copy of the receipt showing that their fingerprints were sent to the Texas Department of Public Safety.

- Submit a formal request for a fingerprint service code by completing the fingerprinting process information required on [TDI's online fingerprint portal](#) to receive the fingerprint service code. Schedule your fingerprint appointment online at www.IdentoGO.com or call 1-888-467-2080. Enter the service code you received from the online fingerprint portal.
- **You do not need to get a fingerprint background check if you live in Texas and either:** (1) have an active license or registration with TDI, or (2) had an escrow officer license that was not canceled for more than 60 days.

If you have an active license or registration or had an escrow officer license, what is or was your license number? _____

To learn more about requirements, go to [Escrow officer license page](#).

Signature

I confirm that all statements, supporting forms, schedules, documents, and exhibits given for this license are true and correct.

Signature

Date

Notary public

The State of _____, County of _____

Before me, _____, on this day personally

Printed name of notary public

appeared _____, known to me (or proved to

Printed full legal name of person completing this form

me on the oath of _____, **or**

Printed name of witness known to notary public

through _____, to be the person whose

Description of identity card or other document

name is subscribed to the foregoing instrument and acknowledged to me that they executed the same for

purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, A.D. _____

(Notary Seal)

Notary public signature

Notary Public State of _____

My commission expires _____

Your rights: You can request information we have about you by emailing OpenRecords@tdi.texas.gov or writing to: Public Information Coordinator, MC: GC-ORO, Texas Department of Insurance, PO Box 12030, Austin, Texas 78711-2030. You also have the right to ask that we fix information we have about you that is wrong. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be fixed, and (3) the reason or proof showing why the information is wrong. Send this by email to RecordCorrections@tdi.texas.gov or by mail to: Record Correction Request, MC: CO-AAL-CC, Texas Department of Insurance, PO Box 12030, Austin, Texas 78711-2030.