

TITLE COMPANIES

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: STATE OF NEW JERSEY Filings Made During the Year 2009

| (1) Check- List | (2) Line # | (3) REQUIRED FILING FOR THE ABOVE STATE | (4) NUMBER OF COPIES* | | | (5) DUE DATE | (6) FORM SOURCE** | (7) APPLICABLE NOTES |
|--|------------------|---|--------------------------|------|---------|----------------------|-------------------------|----------------------------|
| | | | Domestic | | Foreign | | | |
| | | | State | NAIC | State | | | |
| I. NAIC FINANCIAL STATEMENTS | | | | | | | | |
| | 1 | Annual Statement (8 1/2" x 14") | 3 | EO | xxx | 3/1 | NAIC | Must be bound |
| | 1.1 | Printed Investment Schedule detail (Pages E01-E25) | 3 | EO | xxx | 3/1 | NAIC | |
| | 2 | Quarterly Financial Statement (8 1/2" x 14") | 2 | EO | xxx | 5/15, 8/15, 11/15 | NAIC | |
| II. NAIC SUPPLEMENTS | | | | | | | | |
| | 11 | Investment Risk Interrogatories | 3 | EO | xxx | 4/1 | NAIC | |
| | 12 | Management Discussion & Analysis | 3 | EO | xxx | 4/1 | Company | |
| | 13 | Schedule SIS | 3 | N/A | N/A | 3/1 | NAIC | |
| | 14 | Statement of Actuarial Opinion | 3 | EO | xxx | 3/1 | Company | |
| | 15 | Supplemental Compensation Exhibit | 1 | N/A | N/A | 3/1 | NAIC | |
| | 16 | Supplemental Schedule of Business Written By Agency | 3 | EO | | 4/1 | NAIC | |
| III. ELECTRONIC FILING REQUIREMENTS | | | | | | | | |
| | 40 | Annual Statement Electronic Filing | xxx | 1 | xxx | 3/1 | NAIC | |
| | 41 | March .PDF Filing | xxx | 1 | xxx | 3/1 | NAIC | |
| | 42 | Supplemental Electronic Filing | xxx | 1 | xxx | 4/1 | NAIC | |
| | 43 | Supplemental .PDF Filing | xxx | 1 | xxx | 4/1 | NAIC | |
| | 44 | Quarterly Electronic Filing | xxx | 1 | xxx | 5/15, 8/15, 11/15 | NAIC | |
| | 45 | Quarterly .PDF Filing | xxx | 1 | xxx | 5/15, 8/15, 11/15 | NAIC | |
| | 46 | June .PDF Filing | xxx | 1 | xxx | 6/1 | NAIC | |
| IV. AUDITED FINANCIAL STATEMENTS | | | | | | | | |
| | 61 | Accountants Letter of Qualifications | 1 | N/A | N/A | | Company | If applicable |
| | 62 | Audited Financial Statements | 1 | 1 | 1 | 6/1 | Company | |
| | 63 | Audited Financial Statements Exemption Affidavit | 1 | N/A | N/A | | Company | If applicable |
| | 64 | Independent CPA | 1 | N/A | N/A | | Company | If applicable |
| | 65 | Notification of Adverse Financial Condition | 1 | N/A | N/A | | Company | If applicable |
| | 66 | Report of Significant Deficiencies in Internal Controls | 1 | N/A | N/A | | Company | If applicable |
| | 67 | Request for Exemption to File | 1 | N/A | N/A | 12/31/08 | Company | Must be written |
| V. STATE REQUIRED FILINGS | | | | | | | | |
| | 101 | Filings Checklist (with Column 1 completed) | 1 | 0 | 1 | 3/1 | State | |
| | 102 | State Filing Fees | 1 | 0 | 1 | 3/1 | State | See fee letter |
| | 103 | Signed Jurat | xxx | xxx | | 3/1 | NAIC | See note L |
| | 104 | Certificate of Compliance | 0 | xxx | 1 | 3/1 | State | Retaliatory only |
| | 105 | Certificate of Deposit | 0 | xxx | 1 | 3/1 | State | Retaliatory only |
| | 106 | Premium Tax | 1 | xxx | 1 | 3/1 | State | Form Sent by Taxation |
| | 107 | Annual Form B & Form C filing | 1 | N/A | 0 | 4/1 | State | NJSA 27A3(a) |
| | 108 | | | | | | | |
| | 109 | | | | | | | |

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

| | NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS) | |
|-----|--|---|
| A | Required Filings Contact Person: | Joann Jones Telephone (609) 292-5350 ext 50085 Admissions&selfinsurance@dobi.state.nj.us |
| B | Mailing Address: Regular and Express Mail delivered by the United States Postal Service | Office of Solvency Regulation P.O. BOX 325 Trenton, NJ 08625-0325 |
| B-1 | Address for delivery by Courier Services (UPS, FEDEx, DHL) | 20 West State Street 10th Floor Trenton, NJ 08608 |
| C | Mailing Address for Filing Fees: | Same as above |
| D | Mailing Address for Premium Tax Payments: If missing form please call Daniel Boone, Dept. of Treasury, (609) 984-4128 or visit the Dept. of Treasury's website: www.state.nj.us/treasury/taxation/prntins.htm to download Tax forms. | New Jersey Division of Taxation P.O. BOX 247 Trenton, NJ 08646-0247 |
| D-1 | Address for delivery of tax forms by Courier Services (UPS, FEDEx, DHL) | 160 South Broad Street Trenton, NJ 08646 |
| E | Delivery Instructions: | All filings must be received no later than the indicated due date. If the due date falls on a weekend or holiday, then the deadline is extended to the next business day. |
| F | Late Filings: | Companies will be fined \$100 per day for a late filing. |
| G | Original Signatures: | Original signatures required on all filings from domestic companies. Foreign companies should follow the instructions from the NAIC. |
| H | Signature/Notarization/Certification: | President and Secretary, or in their absence, two principal officers must sign the annual statement. |
| I | Amended Filings: | Amended items must be filed within 10 days of their amendment, along with an explanation of the amendments. If there are signature requirements for the original filing, same should be followed for any amendment. |
| J | Exceptions from normal filings: | Foreign companies must supply a written copy of any exemption or any extension received from its state of domicile at least 10 days prior to the filing due date to receive such from NJ. Domestic companies should apply at least 30 days prior to the due date. |
| K | Bar Codes (State or NAIC) | Not Required |
| L | Signed Jurat | All foreign companies must file a copy of the jurat page of its annual statement to allow New Jersey to update its database. |
| M | NONE Filings: | See NAIC Annual Statement Instructions. |
| N | Filings new, discontinued or modified materially since last year: | Commencing January 1, 2007 all filings must be received by their due date. |
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**General Instructions
For Companies to Use Checklist**

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending their own checklist this year.

Electronic filing is intended to include filing via the Internet or filing via diskette with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC. Companies are not required to file hard copy filings with the NAIC.

Column (1) (Checklist)

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The *March Electronic Filing* includes all annual statement data, detail for investment schedules and all supplements due March 1.

The *March .PDF Filing* is the .pdf file for the annual statement, detail for investment schedules and all supplements due March 1.

The *Supplemental Electronic Filing* includes all supplements due April 1, per the *Annual Statement Instructions*.

The *Supplemental .PDF Filing* is the .pdf file for all supplements due April 1.

The *Quarterly Electronic Filing* includes the quarterly statement data.

The *Quarterly .PDF Filing* is the .pdf for quarterly statement data.

The *June .PDF Filing* is the .pdf file for the Audited Financial Statements.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX4) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: "NAIC," "State," or "Company," If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions (generally, on its web site). If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.