

**BANK OF GUYANA (BOG)  
REGISTERED AGENTS  
MULTI-PURPOSE REQUEST FORM**

Name of Registered Agent: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Agent Registration No.: \_\_\_\_\_

Name of Insurer: \_\_\_\_\_

Insurance Classes of Business Registered to Sell:

**LONG-TERM INSURANCE BUSINESS**

**Class 1: General Life**

**Class 2: Health**

**Class 3: Annuities & Pensions**

**GENERAL INSURANCE BUSINESS**

**Class 1: Accident & Liability**

**Class 2: Auto**

**Class 3: Marine & Aviation**

**Class 4: Fire**

Please Tick (✓) the appropriate box where applicable:

I hereby request the following:

<b>CHANGE OF NAME:</b> <input type="checkbox"/>	<p>From: _____</p> <p>To: _____</p> <p>Reason for change of Name: Marriage <input type="checkbox"/> Divorce <input type="checkbox"/></p> <p style="padding-left: 100px;">Deed Poll <input type="checkbox"/> Incorrect spelling <input type="checkbox"/></p> <p style="text-align: center;">Please submit a copy of your Marriage Certificate, Deed Poll, Decree Absolute or Birth Certificate and a fee of <b>\$3,000.00</b> for an updated badge.</p>
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<b>REPLACEMENT BADGE:</b> <input type="checkbox"/>	<p>Original badge was : Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/></p> <p style="padding-left: 100px;">Destroyed By Fire / Flood <input type="checkbox"/> Other <input type="checkbox"/></p> <p style="text-align: center;">A fee of <b>\$3,000.00</b> is required for a replacement badge.</p>
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<b>DUPLICATE CERTIFICATE:</b> <input type="checkbox"/>	<p>Original Certificate was : Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/></p> <p style="padding-left: 100px;">Destroyed By Fire / Flood <input type="checkbox"/> Other <input type="checkbox"/></p> <p style="text-align: center;">A fee of <b>\$5,000.00</b> is required for a duplicate certificate.</p>
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**REGISTRATION FOR ADDITIONAL CLASS (ES) OF INSURANCE BUSINESS**

**LONG TERM INSURANCE**

- 1. General Life:
- 2. Health:
- 3. Annuities & Pensions:

**GENERAL INSURANCE**

- 1. Accident & Liability:
- 2. Auto:
- 3. Marine & Aviation:
- 4. Fire:

**Please Provide:** (1) Proof of insurance qualifications;  
(2) A recent passport-size photograph that has been identified or verified by the insurer;  
(3) The sum of **\$3,000** for an updated badge for either the Long Term Insurance Company or the General Insurance Company or **\$5,000** for two (2) updated badges for both Companies.

**DECLARATION:**

I hereby declare that I have completed this form and that the information stated therein is true and correct. I accept that further information may be required from me before my request is complete. If any part of this form is incomplete, unclear or incorrect, I accept that the processing of my request may be delayed or my application may be refused.

Signed by Agent: \_\_\_\_\_

Dated: \_\_\_\_\_  
(DD/MM/YYYY)

Signed by Sales or Agency Manager: \_\_\_\_\_

Dated: \_\_\_\_\_  
(DD/MM/YYYY)

**THIS FORM MUST BE ACCOMPANIED WITH A COVERING LETTER FROM THE INSURER.**