

**IN THE SUPREME COURT OF THE
STATE OF NEVADA**

HOME WARRANTY
ADMINISTRATOR OF NEVADA,
INC. dba CHOICE HOME
WARRANTY, a Nevada corporation,

Appellant,

vs.

STATE OF NEVADA, DEPARTMENT
OF BUSINESS AND INDUSTRY-
DIVISION OF INSURANCE, a Nevada
administrative agency,

Respondent.

Supreme Court No. 80218

First Judicial District Court
Case No. 17 OC 00269 PB

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Elizabeth A. Brown
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Appeal from First Judicial District Court, State of Nevada, County of Clark
The Honorable James. T. Russell, District Judge

**APPELLANT'S APPENDIX
VOLUME III OF XIV
(AA000276 – AA000499)**

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Division's Opposition to Respondent's Motion to Strike Portions of the Division's Post-hearing Brief (Cause No. 17.0050)	11/14/17	VII	AA001333 – AA001338
Division's Post-hearing Brief Pursuant to Order (Cause No. 17.0050)	10/30/17	VII	AA001299 – AA001307
Division's Pre-hearing Statement (Cause No. 17.0050)	09/06/17	I	AA000178 – AA000188
Findings of Fact, Conclusions of Law, Order of Hearing Officer, and Final Order of the Commissioner (Cause No. 17.0050)	12/18/17	VIII	AA001379 – AA001409
Hearing Date Memo (Case No. 17 OC 00269 1B)	06/06/18	IX	AA001707
Hearing Date Memo (Case No. 17 OC 00269 1B)	08/28/19	XII	AA002292 – AA002294
Hearing Exhibit List by HWAN (Cause No. 17.0050) (<i>Exhibits D, F-H, J-K, M-N, W-X, and HH excluded from appendix as irrelevant to this appeal</i>)	09/06/17	III	AA000276 – AA000499
HWAN's Brief regarding Exhibits KK, LL, and MM (Cause No. 17.0050)	11/13/18	IX	AA001739 – AA001745
HWAN's Closing Argument (Cause No. 17.0050)	11/22/17	VIII	AA001359 – AA001378
HWAN's Notice of Filing Supplemental Hearing Exhibit SS (Cause No. 17.0050)	09/21/17	VII	AA001271 – AA001295
HWAN's Notice of Intent to File Supplemental Hearing Exhibits and Amended Hearing Exhibit List (Cause No. 17.0050)	09/11/17	IV	AA000522 – AA000582
HWAN's Post-hearing Brief on Hearing Officer's Inquiry (Cause No. 17.0050)	10/30/17	VII	AA001308 – AA001325
HWAN's Pre-hearing Statement (Cause No. 17.0050)	09/08/17	IV	AA000500 – AA000513

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HWAN's Reply to Division's Opposition to its Brief regarding Exhibits KK, LL and MM (Cause No. 17.0050)	11/21/18	IX	AA001754 – AA001758
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Joint Motion for Clarification and/or Reconsideration of the May 8, 2019 Order Denying Request for Submission (Case No. 17 OC 00269 1B)	05/30/19	XI	AA002170 – AA002173
Joint Request for Pre-hearing Conference (Cause No. 17.0050)	08/16/17	I	AA000149 – AA000152
Joint Request to Continue Hearing (Cause No. 17.0050)	06/20/17	I	AA000042 – AA000044
Legislative History Statement Regarding NRS 690C.325(1) and NRS 690C.330 (Case No. 17 OC 00269 1B)	11/06/19	XII	AA002295 – AA002358
Limited Opposition to Motion for Pre-hearing Deposition Subpoenas or, in the alternative, Application for Hearing Subpoenas and Application for Subpoena Duces Tecum (Cause No. 17.0050)	07/21/17	I	AA000074 – AA000076
List of Hearing Witnesses by HWAN (Cause No. 17.0050)	09/08/17	IV	AA000514 – AA000517
Motion for Leave of Court Pursuant to FJDCR 15(10) and DCR 13(7) for Limited Reconsideration of Findings Pertaining to HWAN's Petition for Judicial Review (Case No. 17 OC 00269 1B)	11/15/19	XIII	AA002456 – AA002494
Motion for Leave to File Supplemental Memorandum of Points and Authorities Pursuant to NRS 233B.133 and Amend the Record on Appeal (Case No. 17 OC 00269 1B)	02/22/19	X	AA001802 – AA001961
Motion for Leave to Present Additional Evidence (Case No. 17 OC 00269 1B)	04/19/18	IX	AA001663 – AA001680
Motion for Order Shortening Time for Briefing and Decision of Motion for Stay Pending Appeal Pursuant to NRCP 62(D) (Case No. 17 OC 00269 1B)	12/06/19	XIII	AA002574 – AA002582

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Motion for Pre-hearing Deposition Subpoenas or, in the alternative, Application for Hearing Subpoenas and Application for Subpoena Duces Tecum (Cause No. 17.0050)	07/14/17	I	AA000054 – AA000064
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Motion for Stay Pending Appeal Pursuant to NRCP 62(D) (Case No. 17 OC 00269 1B)	12/06/19	XIV	AA002583 – AA002639
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Notice of Appeal (Case No. 17 OC 00269 1B)	12/06/19	XIV	AA002646 – AA002693
Notice of Entry of Order Affirming in Part, and Modifying in Part, Findings of Fact, Conclusions of Law, Order of the Hearing Officer, and Final Order of the Commissioner in Cause No 17.0050 in the Matter of Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty (Case No. 17 OC 00269 1B)	11/27/19	XIII	AA002522 – AA002530
Notice of Entry of Order Denying Motion for Stay (Case No. 17 OC 00269 1B)	02/16/18	VIII	AA001552 – AA001559
Notice of Entry of Order Denying Petitioner's Motion for Leave of Court for Limited Reconsideration of Court's Findings on HWAN's Petition for Judicial Review (Case No. 17 OC 00269 1B)	12/11/19	XIV	AA002717 – AA002723
Notice of Entry of Order Denying Petitioner's Motion for Order Shortening Time for Briefing and Decision on Motion for Stay Pending Appeal Pursuant to NRCP 62(D) (Case No. 17 OC 00269 1B)	12/18/19	XIV	AA002726 – AA002731

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Notice of Entry of Order for Stipulation regarding (1) Withdrawing Notice of Non-Opposition and Request for Submission of Motion for Leave to File Supplemental Memo of Points and Authorities Pursuant to NRS 233B.133 and Amend the Record on Appeal; and (2) Extending the Time for Opposition to and Reply in Support of Motion for Leave to File Supplemental Memo of Points and Authorities Pursuant to NRS 233B.133 and Amend the Record on Appeal (Case No. 17 OC 00269 1B)	04/01/19	X	AA001977 – AA001982
Notice of Entry of Order Granting Petitioner's Motion for Leave to File Supplemental Memorandum of Points and Authorities Pursuant to NRS 233B.133 and Amend the Record on Appeal (Case No. 17 OC 00269 1B)	05/21/19	XI	AA002019 – AA002023
Notice of Entry of Order Granting Petitioner's Motion for Leave to File Supplemental Memorandum of Points and Authorities Pursuant to NRS 233B.133 and Amend the Record on Appeal (Case No. 17 OC 00269 1B)	07/10/19	XI	AA002190 – AA002194
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Notice of Non-Opposition to Respondent's Second Request for Extension of Time to Comply with Subpoena Duces Tecum (Cause No. 17.0050)	06/16/17	I	AA000040 – AA000041
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Order Affirming in Part, and Modifying in Part, Findings of Fact, Conclusions of Law, Order of the Hearing Officer, and Final Order of the Commissioner in Cause No 17.0050 in the Matter of Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty (Case No. 17 OC 00269 1B)	11/25/19	XIII	AA002517 – AA002521
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Reply in Support of Motion for Leave of Court Pursuant to FJDCR 15(10) and DCR 13(7) for Limited Reconsideration of Findings Pertaining to HWAN's Petition for Judicial Review (Case No. 17 OC 00269 1B)	12/04/19	XIII	AA002542 – AA002570

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Reply in Support of Motion for Stay of Final Administrative Decision Pursuant to NRS 233B.140 (Case No. 17 OC 00269 1B)	02/08/18	VIII	AA001538 – AA001548
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Subpoena for Appearance at Hearing to Dolores Bennett (Cause No. 17.0050)	08/04/17	I	AA000092 – AA000095
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Transcript of Hearing Proceedings on November 7, 2019 (Case No. 17 OC 00269 1B)	11/07/19	XIII	AA002384 – AA002455
Updated Hearing Exhibits and Updated Witness List by Division (Cause No. 17.0050) <i>(Exhibits 41-42 excluded from appendix as irrelevant to this appeal)</i>	09/08/17	IV	AA000518 – AA000521

*In re Home Warranty
Administrator of Nevada*

Cause No. 17.0050

Hearing Exhibit List

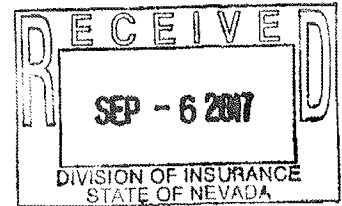


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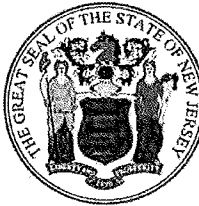
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STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
FILING CERTIFICATE (CERTIFIED COPY)

Corporation Name: CHW GROUP INC
Business Id: 0400289157
Certificate Number: 6000072019

I, THE TREASURER OF THE STATE OF NEW JERSEY, DO HEREBY CERTIFY, THAT THE ABOVE NAMED BUSINESS DID FILE AND RECORD IN THIS DEPARTMENT AN ORIGINAL CERTIFICATE ON May 28, 2009 AND THAT THE ATTACHED IS A TRUE COPY OF THIS DOCUMENT AS THE SAME IS TAKEN FROM AND COMPARED WITH THE ORIGINAL(S) FILED IN THIS OFFICE AND NOW REMAINING ON FILE AND OF RECORD.

IN TESTIMONY WHEREOF, I HAVE HEREUNTO SET MY
HAND AND AFFIXED MY OFFICIAL SEAL AT
TRENTON, THIS
July 14, 2017 A.D.



Ford M. Scudder
Ford M. Scudder
State Treasurer

VERIFY THIS CERTIFICATE ONLINE AT

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE

CERTIFICATE OF INC, (PROFIT)

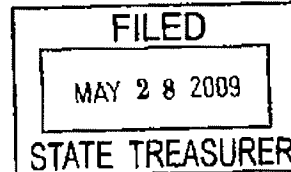
CHW GROUP INC
0400289157

The above-named DOMESTIC PROFIT CORPORATION was duly filed in accordance with New Jersey State Law on 05/28/2009 and was assigned identification number 0400289157. Following are the articles that constitute its original certificate.

1. **Name:**
CHW GROUP INC
2. **Registered Agent:**
VICTOR MANDALAWI
3. **Registered Office:**
510 THORNALL STREET
EDISON , NJ 08837
4. **Business Purpose:**
Home Insurance
5. **Stock:**
200
6. **First Board of Directors:**
VICTOR MANDALAWI
510 THORNALL STREET
EDISON, NJ 08837
7. **Incorporators:**
AINI & LAZAR, PLLC
2218 EAST THIRD STREET
BROOKLYN, NY 11223

Signatures:

AINI & LAZAR, PLLC



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CHW072687

AA000280

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE

CERTIFICATE OF INC, (PROFIT)

CHW GROUP INC
0400289157



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
29th day of May, 2009

A handwritten signature in black ink, appearing to read "R. David Rousseau", followed by a horizontal line.

R. David Rousseau
State Treasurer

Certificate Number: 114485970

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

CHW072688

AA000281

CHW072689

AA000282

Certificate of Business: Fictitious Firm Name

Please Select One:

- ☒ New Application
☐ Renewal of existing fictitious firm name

FILED

JUN 24 2014

Diana Alba
 CLERK

Please Print or Type

The expiration date for such certificates shall be the last day of the sixtieth month from the date of filing.

The undersigned do/does hereby certify that HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.

(Name of individual, corporation, partnership or trust)

with mailing address of 1090 King Georges Post Road, Building 10, Edison, NJ, 08837
 (Mailing Address for notification of renewal) (Street) (City) (State) (Zip)

is/are conducting business in Clark County, Nevada, under the fictitious name of

Choice Home Warranty

(Fictitious Firm Name) or (Doing Business As)

and that said firm is composed of the following person(s) whose name(s) and address(es) are as follows:

By signing below I do solemnly swear (or affirm), under penalty of perjury, that all statements made in this document are true.

(1) Victor Mandalawi President [Signature] 5/16/14
 Full Name and title (Type or Print) Signature Date

1090 King Georges Post Rd Building 10 Edison NJ, 08837
 Street Address of Business or Residence City, State, Zip

Mailing Address, if different from above City, State, Zip

(2) _____
 Full Name and title (Type or Print) Signature Date

Street Address of Business or Residence City, State, Zip

Mailing Address, if different from above City, State, Zip

(3) _____
 Full Name and title (Type or Print) Signature Date

Street Address of Business or Residence City, State, Zip

Mailing Address, if different from above City, State, Zip

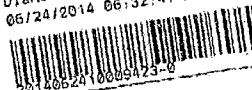
(4) _____
 Full Name and title (Type or Print) Signature Date

Street Address of Business or Residence City, State, Zip

Mailing Address, if different from above City, State, Zip

05 RECEIVED
 JUN 23 2014
 COUNTY CLERK
 111706

Diana Alba, County Clerk
 06/24/2014 06:32:41 PM



567277

CERTIFIED COPY
 DOCUMENT ATTACHED IS A
 TRUE AND CORRECT COPY OF
 THE DOCUMENT OR DATA ON FILE
 MINUS ANY REDACTED PORTIONS

Aug 25 2017

Lynn Marie Gonyea
 CLERK

CHW072703

AA000283

CORPORATION, LLC, BUSINESS TRUST & LEGAL ENTITIES**CERTIFICATE OF BUSINESS: FICTITIOUS FIRM NAME**

* * *THIS CERTIFICATE EXPIRES 5 YEARS FROM FILE DATE* * *

(If renewing, expires 5 years from original file date unless it has lapsed)

☐ Renewal☒ New Filing

THE UNDERSIGNED does hereby certify that IT IS
 conducting a Residential Service Contract business
 at 1090 King Georges Post Road, Building 10, Edison NJ 08837
(Physical street address, City) (State) (Zip code)

under the fictitious firm name of:
Choice Home Warranty

and that said firm is composed of the following legal entity* (or entities) whose mailing address, signing officer's name, and title are as follows:

Legal Entity Name: HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.

(Legal entity must state name exactly as it is on file in state of incorporation)

Entity Mailing Address: 1090 King Georges Post Road, Building 10, Edison, NJ 08837

Signing Officer Name: Victor Mandalaw

Signing Officer Title: President

FOR ADDITIONAL OWNERS, PLEASE USE ADDITIONAL PAGES

Alternate Mailing Address: _____
(PO Box or address other than one listed above)

Prior Related DBA Filing (if applicable): _____

WITNESS my hand this 16th day of May, 20 14

The undersigned hereby swears under penalty of perjury that he/she has authority to sign on behalf of and to bind the above-named legal entity to a contract.

X

[Signature]
Signature of authorized officer

STATE OF New Jersey
 COUNTY OF Middlesex ss.

On this 16 day of May, 20 14 personally appeared before me, a Notary Public:

Victor Mandalaw
(Name of individual whose signature is being notarized)

who acknowledged that he/she executed the above instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official stamp at my office in the County of Middlesex the day and year in this certificate first above written.

[Signature]
Signature of Notary Public

MIRNA CARABALLO
 NOTARY PUBLIC OF NEW JERSEY
 My Commission Expires 7/10/2017

FILED - Nancy Parent, Washoe County Clerk By [Signature]
 \$20.50 CK

143265

CHW073068

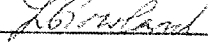
AA000284

CERTIFIED COPY

The foregoing document is a full, true and correct copy of the original on file and of record in my office.

Date: 8-31-17

NANCY PARENT, County Clerk in and for the County of Washoe, State of Nevada.

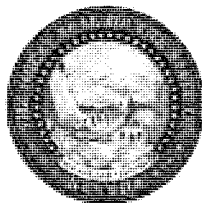
By 
Deputy Clerk

Pursuant to NRS 239B.030 the SSN may be redacted, but in no way affects the legality of the document.

STATE OF NEVADA

BARBARA K. CEGAVSKE
Secretary of State

KIMBERLEY PERONDI
Deputy Secretary
for Commercial Recordings

OFFICE OF THE
SECRETARY OF STATE**Commercial Recordings Division**

202 N. Carson Street
Carson City, NV 89701-4201
Telephone (775) 684-5708
Fax (775) 684-7138

BROWNSTEIN HYATT FARBER SCHRECK LLP

Job: C20170717-1055

July 17, 2017

NV

Special Handling Instructions:

HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.

EMAIL MTURNER@BHFS.COM

7-17-17 JCW

0717-1055

Charges

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Entity Copies	00010692843-63		1	\$2.00	\$2.00
Copies - Certification of Document	00010692843-63		1	\$30.00	\$30.00
Additional Charter	20100545373-70	7/23/2010 9:10:05 AM	1	\$50.00	\$50.00
Total					\$82.00

Payments

Type	Description	Amount
Billed	750102	\$82.00
Total		\$82.00

Credit Balance: \$0.00

Job Contents:

NV Corp Certified Copy Request Cover 1

Letter(s):

Corp Charter(s): 1

BROWNSTEIN HYATT FARBER SCHRECK LLP

NV

CHW072962

AA000286

STATE OF NEVADA

BARBARA K. CEGAVSKE
Secretary of State

KIMBERLEY PERONDI
*Deputy Secretary
for Commercial Recordings*



Commercial Recordings Division
202 N. Carson Street
Carson City, NV 89701-4201
Telephone (775) 684-5708
Fax (775) 684-7138

OFFICE OF THE
SECRETARY OF STATE

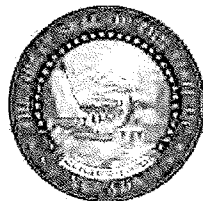
Certified Copy

July 17, 2017

Job Number: C20170717-1055
Reference Number: 00010692843-63
Expedite:
Through Date:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

Document Number(s)	Description	Number of Pages
20100545373-70	Articles of Incorporation	1 Pages/1 Copies



Respectfully,

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Certified By: Jennifer Wilton
Certificate Number: C20170717-1055
You may verify this certificate
online at <http://www.nvsos.gov/>

Commercial Recording Division
202 N. Carson Street
Carson City, Nevada 89701-4201
Telephone (775) 684-5708
Fax (775) 684-7138

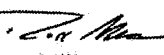
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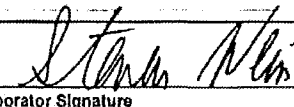
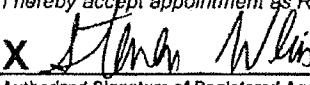
ROSS MILLER
Secretary of State
206 North Carson Street
Carson City, Nevada 89701-4299
(775) 684 5708
Website: www.nvsos.gov

Articles of Incorporation (PURSUANT TO NRS CHAPTER 78)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number 20100545373-70 Filing Date and Time 07/23/2010 9:10 AM Entity Number E0349562010-2
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USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Corporation:	HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.			
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: REGISTERED AGENT SOLUTIONS, INC. Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity 4625 WEST NEVSO DRIVE, SUITE 2 LAS VEGAS Nevada 89103 Street Address City State Zip Code Mailing Address (if different from street address) City State Zip Code			
3. Authorized Stock: (number of shares corporation is authorized to issue)	Number of shares with par value:	Par value per share: \$	Number of shares without par value:	200
4. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) VICTOR MANDALAWI Name 1420 AVENUE P BROOKLYN NY 11229 Street Address City State Zip Code 2) _____ Name Street Address City State Zip Code			
5. Purpose: (optional; see instructions)	The purpose of the corporation shall be:			
6. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)	STEVEN WEISS X  Name Incorporator Signature 1222 AVENUE M, SUITE 201 BROOKLYN NY 11230 Address City State Zip Code			
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. X  07/22/2010 Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date			

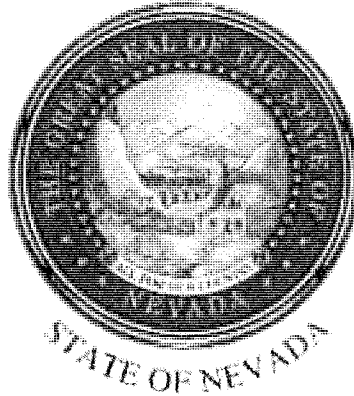
This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 Articles
Revised on 7-1-08

CHW072964

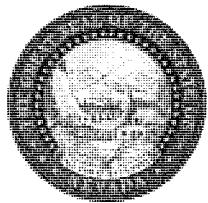
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SECRETARY OF STATE



CORPORATE CHARTER

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that **HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.**, did on July 23, 2010, file in this office the original Articles of Incorporation; that said Articles of Incorporation are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 17, 2017.

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Certified By: Jennifer Wilton
Certificate Number: C20170717-1055
You may verify this certificate
online at <http://www.nvsos.gov/>

CHW072965

AA000289

INDEPENDENT SERVICE PROVIDER AGREEMENT

This Services Agreement (the "Agreement") is made this 29th day of July 2010 by and between CHW Group, Inc. ("CHW"), with a business address of 510 Thornall Street, Edison NJ 08837 and Home Warranty Administrator of Nevada, Inc. (HWSTATE"), with a business address of 90 Washington Valley Road, Bedminster NJ 07921. CHW and HWSTATE may be hereinafter referred to individually as "Party" or collectively as "Parties."

1. Duties of the Parties

A. HWSTATE shall be solely responsible for the following:

- (i) providing warranties for certain home goods, including but not limited to boilers, plumbing systems, electrical systems and major kitchen appliances (each a "Warranty");
- (ii) the cost to honor a Warranty and replace any goods insured thereby.

B. CHW shall provide the following services (collectively 1(B)(i)-(v) are hereinafter referred to as the "Services"):

- (i) communicating with potential clients (the "Clients") seeking Warranties and negotiating the signing of contracts, the form of which shall be previously approved by HWSTATE, between Clients and HWSTATE.
- (ii) collecting any and all amounts paid by the Clients for the Warranties and distributing same to HWSTATE pursuant to the terms of Article 2 hereof;
- (iii) keeping records of all Warranties;
- (iv) providing customer service to Clients; and
- (v) inspecting any claims made by Clients regarding goods under a Warranty and, if possible, repairing same or causing same to be replaced.

2. Fees and Compensation

A. CHW shall be entitled to a flat rate of Fifteen Percent (15%) of the total amount received by HWSTATE from a Client in consideration for a Warranty pursuant to this Agreement (the "Fee"). No later than the thirtieth (30th) day following the end of each calendar month, CHW shall send to HWSTATE a statement detailing: (i) the amounts collected from Clients for new Warranties (the "Revenue"); (ii) the costs to replace any goods under a Warranty (the "Costs"); and (iii) the Fee for that respective calendar month. CHW shall, together with the Statement, disburse to HWSTATE an amount equal to the Revenue less the Fee and the Costs, as detailed in the Statement.

3. **Status of Relationship between and among the Parties**

A. CHW shall act as an independent contractor at all times, and subject only to the general needs and requirements of HWSTATE, CHW shall determine CHW's own days, hours, and places of work. CHW shall be responsible for providing for CHW's own expenses, overhead, transportation and other items or services required to carry out its obligations pursuant to this Agreement. CHW will, in CHW's discretion, determine the means and manner by which CHW performs its obligations pursuant to this Agreement.

B. CHW shall be fully and solely responsible for all applicable insurance and taxes (including the filing of all applicable tax forms). As a result, HWSTATE shall not withhold or pay any payroll or employment taxes of any kind with respect to any payments to CHW during the time covered by this Agreement. CHW understands, acknowledges and agrees that CHW is not eligible for, nor may CHW participate in, any employment benefits or benefit plans provided to HWSTATE employees.

C. Notwithstanding anything contained in or to be inferred from this Agreement to the contrary, the Parties are, and shall remain separate entities, and this Agreement shall not cause the Parties to become partners or joint venturers. Unless otherwise set forth herein, no Party shall have the power or right (nor shall either hold itself out as having such power or right) to bind the other or to undertake any obligations on the other Party's behalf.

4. **Term & Termination**

A. The term of this Agreement shall be for one (1) year and shall automatically renew in annual increments until such time as this Agreement is terminated upon thirty (30) days prior written notice by either Party.

B. This Agreement shall terminate immediately upon the occurrence of any of the following:

- (i) The discontinuance, dissolution, liquidation and/or winding up of either Party's business.
- (ii) The making, by either Party, of any general assignment or arrangement for the benefit of creditors; the filing by or against either Party of a petition to have it adjudged bankrupt under bankruptcy or insolvency laws, unless such petition shall be dismissed or discharged within sixty (60) days; the appointment of a Trustee or receiver to take possession of all or substantially all of either Party's assets, where possession is not restored to the appropriate Party within thirty (30) days; or the attachment, execution or judicial seizure of all or substantially all of either Party's assets where attachment, execution or judicial seizure is not discharged within thirty (30) days.
- (iii) The breach by either Party of any material term or condition hereof, if such breach shall not have been cured, rectified or terminated by the breaching Party to

the other Party's reasonable satisfaction within thirty (30) days after written notice thereof has been received by the breaching Party.

(iv) A Party's receipt of a thirty (30) day notice of termination from the other Party.

C. In the event of the expiration or earlier termination of this Agreement, CHW shall be entitled to the Fees as set forth in Article 2, attributable to any and all Clients that have purchased Warranties prior to such expiration or earlier termination.

D. Upon the expiration or earlier termination of this Agreement, the representations, warranties and covenants of the parties pursuant to Article 5 shall remain in full force and effect for a period of one (1) year.

5. **Representations, Warranties and Covenants**

A. Each Party represents and warrants to the other that the following are true and correct as of the date of this agreement:

- (i) Each Party was duly formed and is validly existing and is in good standing under the laws of the jurisdiction of its formation and has a Federal Tax Identification Number and, on behalf of itself, has the full right, power and authority to enter into this agreement and to perform all of its obligations in accordance with the provisions of this agreement.
- (ii) Neither the execution nor the delivery of this Agreement by the Party nor the performance of any of its obligations under this Agreement will result in the breach or violation of any provision of any, or constitute default under any indenture, contract or other agreement or instrument to which said Party is a part or under which said Party has any rights or obligations.

B. CHW hereby represents and warrants that it, and any of its employees engaged in the sale of the Warranties, are duly licensed to engage in the sale of warranties, or will become duly licensed to engage in the sale of warranties prior to engaging in the sale of warranties.

6. **Confidentiality**

A. The Party disclosing Confidential Information, as such term is defined below, is referred to as the "Disclosing Party" and the Party receiving such Confidential Information shall be referred to as the "Receiving Party."

B. During the term of this Agreement and after its expiration or earlier termination, the Parties covenant that they shall not, directly or indirectly, disclose any Confidential Information of a Disclosing Party. For purposes of this Agreement, the term "Confidential Information" shall mean all or any part of any confidential and/or proprietary information pertaining to a Disclosing Party's business, technology or information of a personal or semi-personal nature about any Disclosing Party's officer, director, employee or agent that is provided

to or otherwise learned by a Party under or in connection with this Agreement. Such Confidential Information shall include, but not be limited to, business concepts, suppliers, manufacturers, jobbers, financial statements, product specifications, formulations, data, technology, know-how, designs, inventions, discoveries, processes, models, software, source codes, drawings, flow-charts, concepts and systems, any and all intellectual property rights and/or trade and business secrets, including without limitation marketing methods, prices, pricing strategies, profit margins, customers, recipes, menus, methods of operation, operating systems, rules, and regulations, whether conveyed to a Receiving Party in tangible form or orally, whether in part or in whole, which has been heretofore or may hereafter be transmitted or otherwise disclosed to a Receiving Party or on behalf of a Disclosing Party. The failure to specifically identify any information, of whatever nature or in whatever form or through whatever medium conveyed by a Disclosing Party in connection herewith as "CONFIDENTIAL" or "PROPRIETARY" shall not render any of such information ineligible for the protection contemplated hereby, the presumption being that *any* information conveyed by a Disclosing Party to a Receiving Party hereunder constitutes Confidential Information unless a specific exclusion set forth in this Agreement conclusively applies to such information.

C. The Parties shall hold in confidence, shall not disclose to any person outside of the Parties, all and any Confidential Information provided hereunder. The Parties shall continue to accord such confidential treatment to all and any Confidential Information indefinitely until such time, if ever, that such Confidential Information falls within one or more of the exclusions expressly set forth in this Agreement.

D. For purposes of this Agreement, Confidential Information shall not include information: (i) which becomes available to the public through no wrongful act or omission of a Receiving Party; (ii) which may have been published prior to the date hereof; (iii) which was already in the Receiving Party's possession at the time of disclosure hereunder and not subject to an existing agreement of confidence between the parties; (iv) which the Receiving Party received after disclosure hereunder from a third party without restriction and without breach of this Agreement; and (v) which is disclosed pursuant to court order or the a requirement of a government agency pursuant to applicable law, provided that the Receiving Party's shall provide as much advance notice thereof as practicable under the circumstances to the Disclosing Party to give Disclosing Party a reasonably fair and timely opportunity to challenge or limit such disclosure. You shall bear the burden of proof regarding the applicability of an exclusion to any Confidential Information.

E. All Confidential Information furnished to the Receiving Party by the Disclosing Party shall be immediately returned by the Receiving Party to the Disclosing Party upon the Disclosing Party's request. Upon such request, the Receiving Party shall certify that it has returned all copies of the Confidential Information in its possession or control, in whatever form or medium created, made, recorded or stored or, if so requested by the Disclosing Party, that it has entirely destroyed all of such copies. Notwithstanding the Disclosing Party providing Confidential Information to the Receiving Party, the Parties agree and acknowledge that all such Confidential Information is, and shall remain, solely and exclusively the property of the Disclosing Party and that by virtue of access to such Confidential Information, the Receiving Party does not have and shall not acquire ownership or other rights thereto.

F. All work and work products, including, but not limited to, contracts, advertising and or media plans, ideas and advertising materials, trade secrets, financial information, customer lists and potential customer lists and any and all patents, copyrights, trade secrets, trademarks, and other intellectual property owned or developed prior to the execution of this Agreement or during the term of this Agreement ("Intellectual Property") shall remain the property of the Party that previously owned or developed the Intellectual Property and nothing from this Agreement shall create any ownership rights or rights to use the Intellectual Property of the other Party in any capacity whatsoever during or after the conclusion of this Agreement.

7. **Indemnification**

A. Each Party shall defend, indemnify and hold harmless the other from and against any and all damages, losses and liabilities whatsoever resulting from any negligence or willful misconduct or any misrepresentation or breach of any warranty or non-fulfillment of any covenant or agreement on the part of such party hereunder, under any certificate or other instrument to be furnished under this Agreement and from and against any and all actions, suits, claims, proceedings, investigations, audits, demands, assessments, fines, judgments, costs and other reasonable expenses (including reasonable legal fees) arising out of or incident to any of the foregoing.

B. HWSTATE shall not be liable to CHW for any indirect, incidental, delay, special, punitive, or consequential damages, from this Agreement, whether arising in contract, tort or otherwise, even if such damages were foreseeable or result from a breach of this Agreement.

C. CHW shall not be liable to HWSTATE for any indirect, incidental, delay, special, punitive, or consequential damages, from this Agreement, whether arising in contract, tort or otherwise, even if such damages were foreseeable or result from a breach of this Agreement.

8. **Audit Provision**

A. No more than once each year during the term of this Agreement, and for three (3) years following the expiration or earlier termination of this Agreement, upon prior written notice to CHW and on a day and time mutually convenient to HWSTATE and CHW. HWSTATE shall be permitted, at its own expense, to inspect CHW's books and records concerning Client fees and invoices. If any audit of CHW's books and records discloses that any payment to HWSTATE was less than the amount that should have been paid pursuant to this Agreement, the payment required to be made to eliminate the discrepancy, plus interest at the rate of 5%, shall be made promptly, and, if the discrepancy is 5% or more of the amount actually paid to HWSTATE, CHW shall promptly reimburse HWSTATE for the cost and expenses of the audit.

9. **Miscellaneous Provisions**

A. Neither the terms of this Agreement nor the rights and duties of the Parties contained herein can be superseded, modified or otherwise changed, except by subsequent written instrument which is signed by both Parties and which expressly states that it is the intent

of the Parties in executing the subsequent Agreement to supersede, modify or otherwise change the terms of the Agreement as executed.

B. The Laws of the State of New Jersey shall govern all disputes regarding this matter. Either Party is entitled to demand arbitration to settle a breach of this Agreement. Venue is to remain in Middlesex County. The Commercial Rules of Arbitration of the American Arbitration Association shall govern over such proceedings.

C. This Agreement shall be binding on and shall inure to the benefit of the Parties and their respective heirs, legal representatives, successors and assigns provided, however, no Party may assign, pledge or otherwise encumber its interest and/or rights under this Agreement without prior consent of the other Party.

D. Should any Party hereto reasonably retain counsel for the purpose of preserving, determining, enforcing or preventing the breach of any rights hereunder, the prevailing Party shall be entitled, in addition to such other relief as may be granted, to be reimbursed by the unsuccessful Party for all costs and expenses incurred thereby, including but not limited to all attorneys' fees and costs actually incurred for the services rendered to such prevailing Party. Further, the prevailing Party shall be entitled to additional awards of attorneys' fees for services reasonably rendered in aid of enforcing such judgment or award or in collecting any monies awarded therein.

E. The Parties agree that no consent, approval or authorization of or designation, declaration or filing with any governmental authority on the part of the Parties is required in connection with the valid execution, delivery and performance of this Agreement or the consummation of any of the transactions contemplated hereby.

F. The headings and captions in this Agreement are inserted as matter of convenience and for reference and shall not be construed to be a substantive part of this Agreement and shall not in any way define, limit, expand or affect the scope or meaning of any provision of this Agreement.

G. Whenever used in the Agreement, as the context requires, the singular number shall include the plural, the plural number shall include the singular, the masculine gender shall include the feminine and the neuter, the feminine gender shall include the masculine and the neuter, the neuter shall include the masculine and the feminine.

H. Each Party hereto covenants, warrants and represents that it will act in good faith, act in due diligence, provide complete cooperation and do such other and further acts, including without limitation, the execution of any documents or instruments which are reasonable or may be necessary, helpful or convenient in carrying out the purposes and intent of this Agreement. Said promises and covenants are mutual and dependent.

I. If any provision of this Agreement or the application thereof is held to be invalid, void or illegal, such provision shall be declared severed and the remainder of this Agreement shall not be affected thereby. In the event any portion of provision hereof shall be deemed illegal

or unenforceable for any reason, there shall be deemed to be such minor change in the portion or provision as is necessary to make it valid and enforceable as so modified. Such a finding shall in no way affect, impair or invalidate any other provision of this Agreement which shall remain in full force and effect.

J. This Agreement may be executed in multiple counterparts, all of which shall be considered one and the same agreement. This Agreement may also be executed via facsimile, which shall be deemed an original.

K. All notices and other communications given or made pursuant hereto shall be sent by reputable overnight courier next day deliver and shall be deemed to have been duly given or made as of the date delivered, to the parties at the at the addresses set forth in this Agreement or at such other address a Party may specify in writing.

L. Failure on the part of the any Party hereto to enforce any of the provisions of this Agreement shall not constitute a waiver of any of the terms or conditions hereof, nor prohibit that Party from thereafter enforcing that and all other terms and conditions of this Agreement. To be effective hereunder, a waiver must be in writing, must set forth the specific terms thereof, and must be duly executed by the waiving Party.

M. This Agreement constitutes the entire agreement between the Parties and supersedes any prior or contemporaneous oral or written representations with regard to the subject matter hereof. No agent, employee, or representative of any Party has any authority to bind such Party to any affirmation, representation or warranty unless such is specifically included within this written Agreement.

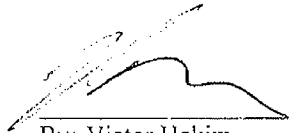
[BALANCE OF PAGE INTENTIONALLY LEFT BLANK]

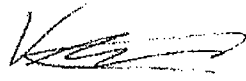
[Signature Page to Follow]

IN WITNESS WHEREOF the undersigned have executed this Agreement as of the day and year first written above. The Parties hereto agree that facsimile signatures shall be as effective as if originals.

CHW

HWSTATE



By: Victor Hakim
Title: CEO

By: Victor Mandalawi
Title: President



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to the contact information below.

Provider Name: **Home Warranty Administrator of Nevada, Inc.**
Current Certificate Number: NV 113194
Initial Certificate Issued: 11/18/2010

Mailing Address:
**90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118**

Contact: **Victor Mandalawi, President**

Phone: (866) 681-3656 Ext.
Fax: (732) 579-5961
E-mail: vmandalawi@homewarrantyadministrators.com

The following questions must be answered before your renewal application can be processed.

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application?

Yes _____ No **X**_____

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

2. Have you made any changes in the administrator or designated a new administrator since your **last** application?

Yes _____ No **X**_____

Current Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

CHW071145

AA000298

Page 2 of 3

3. Since the **last** application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ___ No X
- (b) Been insolvent or adjudged a bankrupt? Yes ___ No X
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ___ No X
- (d) Been lined by any state or governmental agency or authority in any matter regarding service contracts? Yes ___ No X
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes ___ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:

Option 2:

\$25,000 cash deposit with Division (Received 9/14/10) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ___ Explain here and attach appropriate documentation for your choice as listed in the table below:

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

To be issued or maintain a certificate of registration, a provider must comply with one of the following:	
Option 1 Reference: NRS 690C.170(1)	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2 Reference: NRS 690C.170(2)	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B 030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Option 3 Reference: NRS 690C.170(3)	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

CHW071146

AA000299

Page 3 of 3

6. Please provide the following information regarding the service contracts you sell.

- A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

HWA-NV-0711

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

N/A

If you do not sell your contracts at specific locations, how do you contact the potential customer?

Internet & Telephone

- C. Number of service contracts sold to Nevada residents:

Calendar year: 2009 0Calendar year: 2010 0

- D. Service contract revenue – Gross revenue received from Nevada residents:

Calendar year: 2009 \$ 0.00Calendar year: 2010 \$ 0.00

- E. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2009 \$ 0.00Calendar year: 2010 \$ 0.00

- F. Number of customer complaints by Nevada residents:

Calendar year: 2009 0Calendar year: 2010 0

How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated October 31, 2011Telephone No: 866-681-3656Home Warranty Administrator of Nevada, Inc.

Name of Corporation

By _____

Signature of Officer in full

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Victor Mandalawi, President

Print Name and Title

CHW071147

AA000300



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name: **Home Warranty Administrator of Nevada, Inc.**

Current Certificate Number: **NV 113194**

Initial Certificate Issued: **11/18/2010**

Mailing Address:

**90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118**

Contact: **Victor Mandalawi, President**

Phone: **(866) 681-3656** Ext.

Fax: **(732) 579-5961**

E-mail: **vmandalawi@homewarrantyadministrators.com**

The following questions must be answered before your renewal application can be processed.

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application?

Yes ____ No ____

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

2. Have you made any changes in the administrator or designated a new administrator since your **last** application?

Yes ____ No ____

Current Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

CHW071148

AA000301

Page 2 of 3

3. Since the **last** application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ____ No ____
- (b) Been insolvent or adjudged a bankrupt? Yes ____ No ____
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ____ No ____
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ____ No ____
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes ____ No ____

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
Option 2: \$25,000 cash deposit with Division (Receipted 9/14/10) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below:

No ____ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers who obtained a Certificate of Registration before October 1, 2011 must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

CHW071149

AA000302

Page 3 of 3

6. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

If you do not sell your contracts at specific locations, how do you contact the potential customer?

C. Number of service contracts sold to Nevada residents:

Calendar year: 2010 _____

Calendar year: 2011 _____

D. Service contract revenue – Gross revenue received from Nevada residents:

Calendar year: 2010 \$ _____

Calendar year: 2011 \$ _____

E. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2010 \$ _____

Calendar year: 2011 \$ _____

F. Number of customer complaints by Nevada residents:

Calendar year: 2010 _____

Calendar year: 2011 _____

How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____, 20____

Telephone No: _____

 Name of Corporation

By

 Signature of Officer in full

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

 Print Name and Title

CHW071150

AA000303

**Nevada
Invoice - Original**

Page 1

Printed Date: September 14, 2012
 Invoice Date: September 14, 2012
 Balance Due: \$1,000.00
 Due Date: November 18, 2012
 Invoice ID: 403088
 Payor ID: 113194

VICTOR MANDALAWI
 HOME WARRANTY ADMINISTRATOR OF NEVADA INC
 90 WASHINGTON VALLEY RD
 BEDMINSTER NJ 07921-2118

Item Description	Amount
9/14/2012 Service Contract Provider	\$1,000.00
	<u>Original Amount Due</u> \$1,000.00
Payments Received	
	<u>Balance Due</u>

To maintain your Certificate of Registration as a service contract provider, you must renew the certificate on or before the anniversary of the Initial Certificate Issued date. Your renewal application is enclosed, which must be completed and returned with the bottom portion of this invoice and the **\$1,000.00** renewal fee by the **Due Date** indicated on this invoice.

Contact Elena Ahrens, Property and Casualty Section, at eahrens@doi.nv.gov or (775) 687-0764 if you have any questions.

**Nevada
Invoice - Original**

Invoice Date: September 14, 2012
 Balance Due: \$1,000.00
 Due Date: November 18, 2012
 Invoice ID: 403088
 Payor ID: 113194
 Payor Name: HOME WARRANTY
 ADMINISTRATOR OF
 NEVADA, INC.

Make checks payable to: Nevada Division of Insurance
 Tax ID: 88-6000022
 Send payment to:

Nevada Division of Insurance
 1818 E. College Parkway, Suite 103
 Carson City, NV 89706

Detach and Return with Payment

CHW071151

AA000304



Department of Business and Industry

Nevada Division of Insurance

1811 E. College Parkway, Ste 100, Carson City, Nevada 89706 Phone: (775) 687-0766 Fax: (775) 687-0767 Web: dbi.nv.gov

41180

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below

Provider Name: Home Warranty Administrator of Nevada, Inc.
Current Certificate Number: NV 113194
Initial Certificate Issued: 11/18/2010

Mailing Address:
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118
Contact: Victor Mandalawi, President
Phone: (866) 681-3556 Ext.
Fax: (732) 579-5961
E-mail: vmandalawi@homewarrantyadministrators.com

The following question's must be answered before your renewal application can be processed.

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your last application?

Yes ☐ No ☒

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

2. Have you made any changes in the administrator or designated a new administrator since your last application?

Yes ☐ No ☒ Current Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

CHW072807

AA000305

Page 2 of 3.

3. Since the last application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ☐ No ☒
- (b) Been insolvent or adjudged a bankrupt? Yes ☐ No ☒
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ☐ No ☒
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ☐ No ☒
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes ☐ No ☒

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the last application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
Option 2: \$25,000 cash deposit with Division (Received 9/14/10) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ☐ Explain here and attach appropriate documentation for your choice as listed in the table below:

No ☒ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers who obtained a Certificate of Registration before October 1, 2011 must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year At Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

CHW072808

AA000306

Page 3 of 3.

6. Please select the type of service contracts sold by your company (select all that apply):
 Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☒
 Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

7. Please provide the following information regarding the service contracts you sell.
 A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.
 HWA-NV-0711 _____

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.
 N/A _____

If you do not sell your contracts at specific locations, how do you contact the potential customer?
 Internet & Telephone _____

- C. Number of service contracts sold to Nevada residents:
 Calendar year 2011 _____ 1205
 Calendar year 2012 _____ 1874

- D. Service contract revenue - Gross revenue received from Nevada residents:
 Calendar year 2011 \$ _____ 482
 Calendar year 2012 \$ _____ 739

- E. Claims paid - Claims paid on behalf of Nevada residents:
 Calendar year 2011 \$ _____ 105
 Calendar year 2012 \$ _____ 315

- F. Number of customer complaints by Nevada residents:
 Calendar year 2011 _____ 6
 Calendar year 2012 _____ 9

How are complaints handled? _____
 Consumers are contacted and each and every problem is resolved _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated November 18, 2013.
 Telephone No: 866-681-3656

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Home Warranty Administrator of Nevada, Inc.
 Name of Corporation

By Victor Signature of Officer in full

Victor Mandalawi, Owner
 Print Name and Title

CHW072809

AA000307

Nevada
Invoice - Original

Page 1

Printed Date: September 15, 2014
 Invoice Date: September 15, 2014
 Balance Due: \$1,000.00
 Due Date: November 18, 2014
 Invoice ID: 508107
 Payor ID: 113194

VICTOR MANDALAWI
 HOME WARRANTY ADMINISTRATOR OF NEVADA INC DBA CHOICE
 HOME WARRANTY
 90 WASHINGTON VALLEY RD
 BEDMINSTER NJ 07921-2118

Item Description	Amount
9/15/2014 Service Contract Provider	\$1,000.00
	Original Amount Due \$1,000.00
Payments Received	
	Balance Due

To maintain your Certificate of Registration as a service contract provider, you must renew the certificate on or before the anniversary of the Initial Certificate Issued date. Your renewal application is enclosed, which must be completed and returned with the bottom portion of this invoice and the \$1,000.00 renewal fee by the Due Date indicated on this invoice.

Contact Derick Dennis, Property and Casualty Section, at ddennis@doi.nv.gov or (775) 687-0769 if you have any questions.

Nevada
Invoice - Original

Invoice Date: September 15, 2014
 Balance Due: \$1,000.00
 Due Date: November 18, 2014
 Invoice ID: 508107
 Payor ID: 113194
 Payor Name: HOME WARRANTY
 ADMINISTRATOR OF
 NEVADA, INC. DBA
 CHOICE HOME
 WARRANTY

Make checks payable to: Nevada Division of Insurance
 Tax ID: 88-6000022
 Send payment to:

Nevada Division of Insurance
 1818 E. College Parkway, Suite 103
 Carson City, NV 89706

Detach and Return with Payment

CHW071152

AA000308



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste. 103, Carson City, NV 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below

Provider Name: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty

Current Certificate Number: 113194

Initial Certificate Issued: 11/18/2010

Mailing Address: 90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Contact: Victor Mandalawi, President
Phone: (866) 681-3656
Fax: (732) 579-5961
E-mail: vmandalawi@homewarrantyadministrators.com

The following questions must be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As). Provide supporting documentation.

NA

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your last application?

Yes ___ No X

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have you made any changes in the administrator or designated a new administrator since your last application?

Yes ___ No X Current Administrator is listed as:

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

Page 2 of 4

4. Since the **last** application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ___ No X
- (b) Been insolvent or adjudged a bankrupt? Yes ___ No X
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ___ No X
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ___ No X
5. Other than traffic infractions, are there any pending criminal actions against any of the applicant's officers or directors? Yes ___ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

6. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
Option 2: \$25,000 cash deposit with Division (Receipted 9/14/10), \$85,000 cash deposit with Division (Receipted 5/14/14) (\$110,000 total) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ___ Explain here and attach appropriate documentation for your choice as listed in the table below: _____

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Financial Security Options: Service Contract Providers must comply with one of the following financial security options to maintain a Certificate of Registration:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account that contains at all times an amount of money equal to at least 40% of the unearned gross consideration received from Nevada residents for unexpired service contracts <u>and</u> deposit with the Commissioner \$25,000 or 10% of the unearned gross consideration received from Nevada residents for unexpired service contracts, whichever is greater. The security deposited with the Commissioner may be a surety bond, or other securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: Submit updated security deposit with the Commissioner to reflect 10% of unearned gross consideration as of December 31, 2013, or \$25,000, whichever is greater, with this renewal, or verify that the current security continues in force in the correct amount.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

Page 3 of 4

7. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☒
 Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

8. Please provide the following information regarding the service contracts you sell.

- A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

HWA-NV-0711

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

NA

If you do not sell your contracts at specific locations, how do you contact the potential customer?

Internet & Telephone

- C. Number of service contracts sold to Nevada residents:

Calendar year: 2012 1839

Calendar year: 2013 2193

- D. Gross Revenue received from Nevada residents:

Calendar year: 2012: \$ 1,039,293

Calendar year 2013: \$ 1,789,614

- E. If Using Financial Security Option 2, complete the following:

Unearned gross consideration* on all unexpired service contracts sold to Nevada residents:

As of December 31, 2012: \$ 688,800

As of March 31, 2013: \$ 753,134

As of June 30, 2013: \$ 857,405

As of September 30, 2013: \$ 1,038,608

As of December 31, 2013: \$ 1,094,207

As of March 31, 2014: \$ 1,250,689

As of June 30, 2014: \$ 1,527,066

As of September 30, 2014: \$ 1,625,855

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

- F. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2012 \$ 315,352

Calendar year: 2013 \$ 513,787

- G. Number of customer complaints by Nevada residents:

Calendar year: 2012 _____

Calendar year: 2013 _____

How are complaints handled? _____

Page 4 of 4

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated November 12, 2014

Telephone No: 866-681-3656

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Home Warranty Administrator of Nevada, Inc.
Name of Corporation

By _____
Signature of Officer in full

Victor Mandalawi, President
Print Name and Title



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste. 103, Carson City, NV 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below

Provider Name: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
 Current Certificate Number: 113194
 Initial Certificate Issued: 11/18/2010

Mailing Address: 90 WASHINGTON VALLEY RD
 BEDMINSTER, NJ 07921-2118

Contact: Victor Mandalawi, President
 Phone: (866) 681-3656
 Fax: (732) 579-5961
 E-mail: vmandalawi@homewarrantyadministrators.com

The following questions must be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As). Provide supporting documentation.
- NA _____

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application?

Yes ____ No X

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have you made any changes in the administrator or designated a new administrator since your **last** application?

Yes ____ No X

Current Administrator is listed as:

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

Page 2 of 4

4. Since the **last** application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ___ No X
- (b) Been insolvent or adjudged a bankrupt? Yes ___ No X
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ___ No X
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ___ No X
5. Other than traffic infractions, are there any pending criminal actions against any of the applicant's officers or directors? Yes ___ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

6. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
Option 2: \$25,000 cash deposit with Division (Receipted 9/14/10), \$85,000 cash deposit with Division (Receipted 5/14/14), \$52,585.50 check deposit with Division ck#1824 (Receipted 12/14) (\$162,585.50 total) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ___ Explain here and attach appropriate documentation for your choice as listed in the table below:

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Financial Security Options: Service Contract Providers must comply with one of the following financial security options to maintain a Certificate of Registration:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account that contains at all times an amount of money equal to at least 40% of the unearned gross consideration received from Nevada residents for unexpired service contracts <u>and</u> deposit with the Commissioner \$25,000 or 10% of the unearned gross consideration received from Nevada residents for unexpired service contracts, whichever is greater. The security deposited with the Commissioner may be a surety bond, or other securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: Submit updated security deposit with the Commissioner to reflect 10% of unearned gross consideration as the end of the most recent quarter, or \$25,000, whichever is greater, with this renewal, or verify that the current security continues in force in the correct amount.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

Page 3 of 4

7. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☒
 Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

8. Please provide the following information regarding the service contracts you sell.

- A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

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- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.
NA

If you do not sell your contracts at specific locations, how do you contact the potential customer?

Internet & Telephone

- C. Number of service contracts sold to Nevada residents:

Calendar year: 2013 2193

Calendar year: 2014 2899

- D. Gross Revenue received from Nevada residents:

Calendar year: 2013: \$ 1 789 614
 Calendar year 2014: \$ 2 267 364

- E. If Using Financial Security **Option 2**, complete the following:

Unearned gross consideration* on all unexpired service contracts sold to Nevada residents:

As of December 31, 2014: \$ _____

As of March 31, 2014: \$ 1 250 689

As of June 30, 2014: \$ 1 527 066

As of September 30, 2014: \$ 1 625 855

As of December 31, 2014: \$ 1 756 768

As of March 31, 2015: \$ 1 921 552

As of June 31, 2015: \$ 2 111 480

As of September 30, 2015: \$ 2 357 658

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

- F. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2013 \$ 315 352

Calendar year: 2014 \$ 723 835

- G. Number of customer complaints by Nevada residents:

Calendar year: 2013 _____

Calendar year: 2014 _____

Page 4 of 4

9. How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated November 17, 2015

Telephone No: 866-681-3656

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Home Warranty Administrator of Nevada Inc.
Name of Corporation

By _____
Signature of Officer in full

Victor Mandalawi, President
Print Name and Title



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below

Provider Name: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
Current Certificate Number: NV 113194
Initial Certificate Issued: 11/18/2010

Mailing Address:
90 WASHINGTON VALLEY RD
BEDMINSTER NJ 07921-2118

Contact: Victor Mandalawi, President
Phone: (866) 681-3656 Ext.
Fax: (732) 579-5961
E-mail: vmandalawi@homewarrantyadministrators.com

The following questions must be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As) in Nevada. Provide supporting documentation filed with the County Clerk of the county in which the company is doing business.
NA

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your last application?

Yes ☐ No ☒

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have there been any changes in the percentage of ownership?

Yes ☐ No ☒

If yes, please attached a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence
6. Percentage of Company Owned

Page 2 of 4

4. Have there been any changes in the administrator or designated a new administrator since your last application?

Yes ____

No XCurrent Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

_____ () _____

5. Since the last application, has the applicant or any of the officers listed in question 1 ever:

(a) Been convicted of a felony or any misdemeanor?

Yes ____ No X

(b) Been insolvent or adjudged a bankrupt?

Yes ____ No X

(c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority?

Yes ____ No X

(d) Been fined or had any administrative actions taken by any state or governmental agency or authority in any matter regarding service contracts?

Yes ____ No X

(e) Other than traffic infractions, are there any past/pending criminal or civil actions against any of the applicant's officers or directors?

Yes ____ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

6. In the last application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:

Option 2: \$25,000 cash deposit (Receipted 9/14/10), \$85,000 cash deposit (Receipted 5/14/14), \$52,585.50 check deposit ck#1824 (Receipted 12/14), \$73,180.30 check #1802 (Receipted 12/9/15) (\$235,765.80 total), and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below.

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Page 3 of 4

Service Contract Providers must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells, or offers for sale. Each Year at Renewal: <i>Submit documentation from the insurer verifying that the policy is still current and in full force.</i>
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: <i>Submit documentation verifying that the security of 40% of unearned gross consideration on all unexpired service contracts sold to Nevada residents. The reserve account shall be maintained exclusively for service contracts in this state. Monthly statements of the reserve account (3 monthly statements) must be submitted to the Division at the end of each calendar quarter.</i>
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: <i>Submit a copy of the most current 10K or 20F form that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.</i>

8. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☒
 Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

9. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

HWA-NV-0711

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

Internet & Telephone

If you do not sell your contracts at specific locations, how do you contact the potential customer?

C. Number of service contracts sold to Nevada residents:

Calendar year: 2014 2899

Calendar year: 2015 5682

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

Calendar year: 2015 \$ 1, 154, 944.

Calendar year: 2015

10. How are complaints handled?

Revised 7/5/16

From: Mary Strong
Sent: Wednesday, February 01, 2017 3:24 PM
To: 'vmandalawi@homewarrantyadministrators.com'
Cc: Rajat Jain; Timothy Ghan
Subject: State of Nevada Service Contract Provider Application - Renewal

Dear Mr. Mandalawi,

The Division of Insurance is in the process of reviewing the Renewal Application for Home Warranty Administrators of Nevada, Inc. dba Choice Home Warranty.

To expedite our review, the Division is requesting that you provide the number of open service contracts for Home Warranty Administrators of Nevada, Inc. dba Choice Home Warranty.

Please provide the following information in Excel format for each open contract:

Name
Address
City, State and Zip
Policy purchase Date
Amount of Contract
Contract Expiration Date

Please provide the requested information by February 9, 2017.

Sincerely,

Mary Strong

Management Analyst III
Property & Casualty Section
Nevada Division of Insurance
1818 E. College Pkwy Suite 103
Carson City, NV 89706-7986
(775) 687-0763 direct
(775) 687-0700 main
(775) 687-0787 fax

CONFIDENTIALITY STATEMENT:

This e-mail and any attachments are intended only for those to which it is addressed and may contain information which is privileged, confidential and prohibited from disclosure and unauthorized use under applicable law. If you are not the intended recipient of this e-mail, you are hereby notified that any use, dissemination, or copying of this e-mail or the information contained in this e-mail is strictly prohibited by the sender. If you have received this transmission in error, please return the material received to the sender and delete all copies from your system

CHW071144

AA000321

Department of Business and Industry

Nevada Division of Insurance

Consumers

Health Insurance Rates

Licensing

Insurers

Captive Insurers

Self-Insured

News & Notices

Quick Links

NEW SEARCH

HOME WARRANTY ADMINISTRATOR OF NEVADA, INC. DBA CHOICE HOME
WARRANTY

Address:

90 WASHINGTON VALLEY RD
BEDWINSTER, NJ 07021-0118

Email:

vmandalawi@homewarrantyadministrators.com

Status:

Inactive

Phone:

866-681-3656

Date:

11/18/2016

URL:

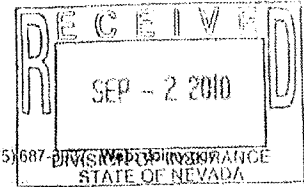




Department of Business and Industry

Nevada Division of Insurance

788 Fairview Drive, Suite 300, Carson City, Nevada 89701-5491 Phone: (775) 687-4270 Fax: (775) 687-4270



Service Contract Provider Application

The following questions must be answered by all applicants.

ORG. ID # 113194

Section I:

Provider Name: Home Warranty Administrator of Nevada, Inc.
 Corporation Address: 90 Washington Valley Road
 Mailing Address (if different): Bedminster
 Federal Employer ID: 90-0594950
 State: NJ Zip: 07921
 Contact: Victor Mandalawi
 Phone: 866-681-3656
 Fax: 732-579-5961
 E-mail: vmandalawi@homewarrantyadministrators.com
 Date of incorporation of applicant: July 23, 2010
 State of incorporation of applicant: Nevada

Please attach a list of executive officers and all officers responsible for service contract business and include the following information (attach additional sheets if necessary):

Name	Title	Date of Birth	Social Security Number
Victor Mandalawi	President	11/07/1984	124-74-3953
412 Gravesend Neck Road	Brooklyn	NY	11223

Name	Residence	Org ID:	Security Deposit Proceeds	Total:	Social Security Number
9/14/2010 KR Sect: 4 611- 62440C- 4545	Chk #: 1812	--HOME WARRANTY ADMINISTRATOR OF		\$25,000.00	

Please attach a copy of the applicant's charter or certificate of incorporation.

Have you designated an administrator to be responsible for administration of Nevada service contracts? ☐ Yes ☒ No

List names and addresses of the administrators designated. Attach additional sheets if necessary.

Name	Address	City	State	Zip
Name	Address	City	State	Zip

9/3/2010 KR Sect: 4 10- 38130C- 3700 FY: 2011
 Service Contract - Application/Renewal Total: \$1,000.00
 Chk #: 1811 - HOME WARRANTY ADMINISTRATOR
 Org ID: --HOME WARRANTY ADMINISTRATOR OF

9/3/2010 KR Sect: 4 10- 38130C- 3603 FY: 2011
 Corporate Assessment Total: \$1,300.00
 Chk #: 1813 - HOME WARRANTY ADMINISTRATOR
 Org ID: --HOME WARRANTY ADMINISTRATOR OF

1 of 3

CHW073071

AA000323

Section II:

Within the past 10 years, has applicant or any of the officers listed in Section I ever:

- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? ☐ Yes ☒ No
- (b) Been insolvent or adjudged a bankrupt? ☐ Yes ☒ No
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? ☐ Yes ☒ No
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? ☐ Yes ☒ No
- Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? ☐ Yes ☒ No

Please note: If any part of Section II was answered, "yes," attach an explanation.

Section III:

Which **one** of the following proofs of financial responsibility is the applicant using to comply with requirements of Nevada Revised Statute (NRS) 680C.170?

Provide appropriate documentation for the option selected.

☐ 1. Contractual Liability Insurance Policy issued by an insurer authorized to transact insurance in Nevada. Provide a copy of the policy.

☒ 2. Maintain a reserve account in an amount equal to at least 40 percent of the gross consideration received by the provider for any unexpired service contracts less any claims paid on those unexpired service contracts. Provide an affidavit signed by a corporate officer and attesting to the accuracy of the reserve account.

And

Deposit with the Commissioner security in an amount equal to \$25,000 or 5 percent of the gross consideration received by the provider for any unexpired service contracts, less any claims paid on the unexpired service contracts, whichever is greater.

Security must be one or more of the following. Check all that apply:

- ☐ a. Surety bond issued by surety company authorized to do business in Nevada
- ☐ b. Securities of the type eligible for deposit pursuant to NRS 682B.030
- ☒ c. Cash
- ☐ d. An irrevocable letter of credit issued by a qualified U.S. financial institution

☐ 3. Maintain, or be a subsidiary of a parent company that maintains, a net worth or stockholders' equity of at least \$100,000,000. Provide a copy of the most recent Form 10-K report or Form 20-F report that has been filed with the SEC, or provide a copy of the most recently audited financial statement.

Please note: Pursuant to NRS 680C.120, NRS 680C.170 and NRS 679B.225, documentation that the selected proof of financial responsibility continues in force **must be submitted annually** with the appropriate renewal application.

Section IV:

The applicant certifies that the service contracts issued in this state meet the requirements set forth in Chapter 890C of the Nevada Revised Statutes and the Nevada Administrative Code, and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing application are true and hereby subscribe thereto.

Please note: This application must be verified and signed by one of the officers named in Section I of this application.

Date

Name of Corporation

Phone

07/29/2010

Home Warranty Administrator of Nevada, Inc. 866-681-3656

Signature of Officer in Full

Print Name and Title


Victor Mandalawi, President

VERIFICATION

STATE OF NEW JERSEY)
Middlesex) SS.
COUNTY OF ~~SOMERSET~~)

Victor Mandalawi, hereby affirms under the penalties of perjury the following:

1. I am the President of Home Warranty Administrator of Nevada, Inc. and am authorized to make this verification.
2. I have read and know the contents of the foregoing Service Contract Provider Application and that to the best my knowledge the same are true, except as to the matters to be alleged on information and belief, and as to those matters I believe them to be true.
3. The basis of my belief as to all matters in said Service Contract Provider Application are a general investigation and review of the facts and records of Home Warranty Administrator of Nevada, Inc..


Victor Mandalawi

Sworn to before me on this
31st day of August, 2010

Ernestine
Notary Public

Emery J. Fisher III
Notary Public
My Commission Expires 4/1/12

CHW073074

AA000326

Home Warranty Administrator Nevada, Inc.
90 Washington Valley Road
Bedminster, NJ 07921

Garden State Community Bank
1162 Green
Iselin, NJ 08830
55-3872/2212

1812

Date 8/24/2010

Pay To The Order Of Nevada Division of Insurance

\$ 25,000.00

Twenty-Five Thousand Dollars and 00/100

Nevada Division of Insurance
788 Fairview Drive
Carson City, NV 89701

Memo: Security Deposit

SIGNATURE AREA HAS A COLORED BACKGROUND - BORDER COPIES MUST BE SIGNED

⑈000001812⑈ ⑆221278721⑆55600001537⑈

Date: 8/24/2010

Check No: 1812

Amount: \$25000.00

Pay to: Nevada Division of Insurance

BANK OF AMERICA, N.A.
Nevada State Treasurer
Nevada Dept. - Carson City
Nevada, OK 741
DEPOSIT ONLY
38-009-2300

CHW073075

AA000327

Report Date: Wednesday, September 15, 2010
 Receipt Date: Tuesday, September 14, 2010

SECTION REGISTER - RECEIPTING

REVISED

Fiscal Year 2011

ID #	Name	Section #	Transaction Description	Fund	Budget	GL Num	Check Number	Issuer of Check	Amount Received
4	PGP TITLE INC	4	Property Casualty Filing Fee	101	974100	3243	193537	CTAS LLC	\$35.00
Fund/Dept: 101 741-3100 Budget: 974100									
Total Monies for GL #: 3243									\$35.00
4	ALPHA WARRANTY SERVICES INC	4	Service Contract - Application/Renewal	101	381300	3700	16504	ALPHA WARRANTY SERVICES	\$1,000.00
4	HOME WARRANTY ADMINISTRATOR OF NEVADA	4	Service Contract - Application/Renewal	101	381300	3700	1814	HOME WARRANTY	\$25.00
4	NICOR ENERGY SERVICES COMPANY DBA NICOR	4	Service Contract - Application/Renewal	101	381300	3700	55277	NICOR SERVICES	\$1,000.00
4	RC WHILEY	4	Service Contract - Application/Renewal	101	381300	3700	2209	RC WHILEY	\$75.00
4	UNITED STATES WARRANTY CORPORATION	4	Service Contract - Application/Renewal	101	381300	3700	68209	UNITED STATES WARRANTY	\$25.00
Fund/Dept: 101 741-3100 Budget: 381300									
Total Monies for GL #: 3700									\$2,125.00
4	LAURIE SACCONI - PERR & KNIGHT	4	Copy Fees	101	381300	3820	26516	PERR & KNIGHT INC	\$14.50
4	PATRICK R. LEVERTY - LEVERTY & ASSOCIATES	4	Copy Fees	101	381300	3820	14691	LEVERTY & ASSOCIATES	\$468.50
Fund/Dept: 101 741-3100 Budget: 381300									
Total Monies for GL #: 3820									\$483.00
4	HOME WARRANTY ADMINISTRATOR OF NEVADA	4	Security Deposit Process	615	624400	4545	1812	HOME WARRANTY	\$25,000.00
Fund/Dept: 615 741-3100 Budget: 624400									
Total Monies for GL #: 4545									\$25,000.00
TOTAL OF ALL MONIES									\$27,643.00

Check No: 1811

Date: 8/24/2010

Amount: \$1000.00

Pay to: Nevada Division of Insurance

Check No: 1811

Date: 8/24/2010

Amount: \$1000.00

Pay to: Nevada Division of Insurance

CHW073077

AA000329

Check No: 1812

Date: 8/24/2010

Amount: \$25000.00

Pay to: Nevada Division of Insurance

Check No: 1812

Date: 8/24/2010

Amount: \$25000.00

Pay to: Nevada Division of Insurance

CHW073078

AA000330

Check No: 1813

Date: 8/31/2010

Amount: \$1300.00

Pay to: Nevada Division of Insurance

Check No: 1813

Date: 8/31/2010

Amount: \$1300.00

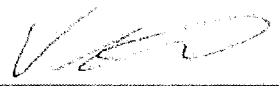
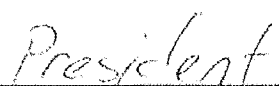
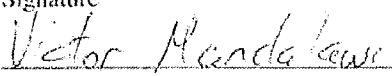
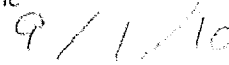
Pay to: Nevada Division of Insurance

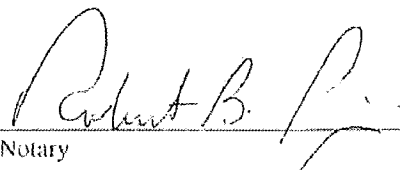
CHW073079

AA000331

RE: Home Warranty Administrator of Nevada, Inc.

I Victor Mandalawi, President, of Home Warranty Administrator of Nevada, Inc. hereby affirm that we will maintain a reserve account in accordance with the requirements outlined in NRS 690C.170(2). The reserve account will contain at all times an amount of money equal to at least 40 percent of the gross consideration received by this provider for any unexpired service contracts, less any claims paid on those unexpired service contracts.

 _____ Signature	 _____ Title
 _____ Print Name	 _____ Date



Notary

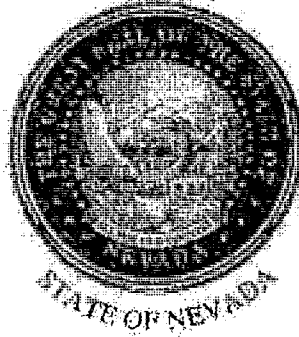
Robert B. Fiedinger
Notary Public
My Commission Expires
8/15/14

CHW073080

AA000332

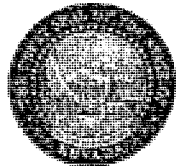
EXHIBIT 1

SECRETARY OF STATE



CORPORATE CHARTER

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.**, did on July 23, 2010, file in this office the original Articles of Incorporation; that said Articles of Incorporation are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 23, 2010.

A handwritten signature of Ross Miller in dark ink.

ROSS MILLER
Secretary of State

Certified By: GJ Jalilet
Certificate Number: C20100723-1034
You may verify this certificate
online at <http://www.nvsos.gov/>

CHW073082

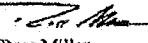
AA000334



ROSS MILLER
Secretary of State
205 North Carson Street
Carson City, Nevada 89701-4289
(775) 684 6708
Website: www.nvsos.gov

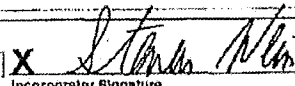
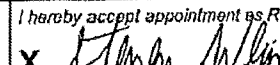
Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number 20100545373-70 Filing Date and Time 07/23/2010 9:10 AM Entity Number E0349562010-2
--	--

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Corporation:	HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.		
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: REGISTERED AGENT SOLUTIONS, INC. Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity 4625 WEST NEVSO DRIVE, SUITE 2 LAS VEGAS Nevada 89103 Street Address City Zip Code Mailing Address (if different from street address) City State Zip Code		
3. Authorized Stock: (number of shares corporation is authorized to issue)	Number of shares with par value:	Par value per share: \$	Number of shares without par value: 200
4. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) VICTOR MANDALAWI Name 1420 AVENUE P BROOKLYN NY 11229 Street Address City State Zip Code 2) _____ Name _____ Street Address _____ City _____ State _____ Zip Code _____		
5. Purpose: (optional; see instructions)	The purpose of the corporation shall be:		
6. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)	STEVEN WEISS <input checked="" type="checkbox"/>  Name Incorporator Signature 1222 AVENUE M, SUITE 201 BROOKLYN NY 11230 Address City State Zip Code		
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. <input checked="" type="checkbox"/>  Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date 07/22/2010		

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 A (04/01)
Revised on 7-1-08

CHW073083

AA000335

Entity Details - Secretary of State, Nevada

Page 1 of 1

HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.

Business Entity Information			
Status:	Active	File Date:	7/23/2010
Type:	Domestic Corporation	Entity Number:	E0349562010-2
Qualifying State:	NV	List of Officers Due:	8/31/2010
Managed By:		Expiration Date:	
NV Business ID:	NV20101558602	Business License Exp:	

Registered Agent Information			
Name:	REGISTERED AGENT SOLUTIONS, INC.	Address 1:	4625 WEST NEVSO DR SUITE 2
Address 2:		City:	LAS VEGAS
State:	NV	Zip Code:	89103
Phone:		Fax:	
Mailing Address 1:		Mailing Address 2:	
Mailing City:		Mailing State:	NV
Mailing Zip Code:			
Agent Type:	Commercial Registered Agent - Corporation		
Jurisdiction:	CALIFORNIA	Status:	Active

Financial Information			
No Par Share Count:	200.00	Capital Amount:	\$ 0
No stock records found for this company			

Officers	<input type="checkbox"/> Include Inactive Officers
No active officers found for this company	

Actions\Amendments			
Action Type:	Articles of Incorporation		
Document Number:	20100545373-70	# of Pages:	1
File Date:	7/23/2010	Effective Date:	
Initial Stock Value: No Par Value Shares: 200		Total Authorized Capital: \$ 0.00	

EXHIBIT 2



July 29, 2010

State of Nevada
Department of Business & Industry
788 Fairview, Suite 300
Carson City, NV 89701-5453

Executive Officers of Home Warranty Administrator of Nevada, Inc.

Victor Mandalawi - President
412 Gravesend Neck Road
Brooklyn, NY 11223
SSN: 124-74-3953 DOB: 11/07/1984



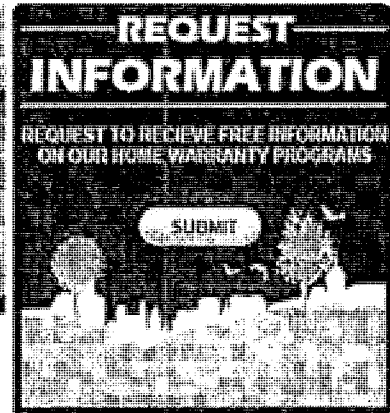
TOLL FREE: (866) 681-3656

HOMEOWNERS REAL ESTATE PROFESSIONALS CONTRACTORS TERMS & CONDITIONS CONTACT US



We'll protect your investment, while you enjoy your home.

A home is the single largest investment that most people will ever make, and the last thing that any new home owner wants to deal with is costly repairs or replacement of complex or aging systems and appliances. Home Warranty Administrators helps manage and protect your home expenses - beyond the provisions of standard homeowner's insurance policies.



What is a home warranty?	Why Home Warranty Administrators?	What if I need service?
A home warranty is a renewable service contract that covers the repair or replacement of many of the most frequently occurring breakdowns of system components and appliances, which fail due to normal wear and tear.	We strive to provide high value and protection against the ever-increasing cost of home and appliance repair. Home Warranty Administrators offers various plans, various options and premium coverage to customize a package to fit your specific needs.	Our Service Department is available 24 hours-a-day, 365 days-a-year. There is no limit to the amount of times you can call for service. Make one toll-free call to our Service Department at 1-866-681-3656, or submit your claims online.

[Home](#) | [About Us](#) | [Privacy Statement](#) | © 2010 Home Warranty Administrators



**HOME WARRANTY
ADMINISTRATORS**

TOLL FREE: (866) 681-3656

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[ADMINISTRATORS](#)

[CONTRACTORS](#)

[TERMS & CONDITIONS](#)

[CONTACT US](#)

About Us

About Us

Home Warranty Administrators

Home Warranty Administrators is dedicated to providing the most comprehensive coverage and service. Our goal is to provide world class service of administration including customer service claims and mediation. Home Warranty Administrators hires employees who fit our visionary company standard; Customer Service Representatives who can take your need and follow it through to resolution. We pride ourselves on superior service, including quick response time and efficient solutions for homeowners' problems and needs. Our Sales Representatives do not just take orders, but rather educate consumers on the type of coverage offered by Home Warranty Administrators in order for them to get the most out of their Home Warranty Administrators experience.

A Home Warranty Administrators home warranty plan is a service contract covering a multitude of systems and appliances needed for everyday life. Home warranties in general cover most, but not necessarily all, appliance breakdowns and major system failures. A home warranty can be very beneficial and save you money when it is understood and used for its intended purpose, which is to cover properly maintained systems and appliances for normal wear and tear, that were in working condition before the contract took effect.

About Us



For more information
on our warranties
1 (866) 681-3656

[Home](#) | [About Us](#) | [Privacy Statement](#) | © 2010 Home Warranty Administrators

Check Out a Business . Charity

Business/Charity Name Type of Business Phone, URL, Email

Business/Charity Name: home warranty administrator of nevada


City:

State/Province:

Postal Code:

☐ Limit my results to BBB Accredited Businesses

☐ Limit my results to only charities

 What is a
BBB Accredited
Business?
[Learn More](#)
[Contact Us](#)
[Help](#)

Search Results

There are no results for 'home warranty administrator of nevada'.

Suggestions:

- Check your search terms and try again.
- Ask the BBB to Develop a Report for this Business/Charity

Check Out a Business : Charity

Business/Charity Name Type of Business Phone, URL, Email

Business/Charity Name: home warranty adminis

City:

State/Province:

Postal Code:

☐ Limit my results to BBB Accredited Businesses

☐ Limit my results to only charities



What is a
BBB Accredited
Business?

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Search Results

There are no results for 'home warranty adminis'.

Suggestions:

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- Ask the BBB to Develop a Report for this Business/Charity

STATE OF NEVADA
DEPARTMENT OF
BUSINESS & INDUSTRY

DIVISION OF INSURANCE

Memo

Date: 7/8/2014
To: Scott J. Kipper, Commissioner of Insurance
From: Derick Dennis, Management Analyst
Re: Name change (Org. ID # 113194)

From: Home Warranty Administrator of Nevada, Inc.
To: Home Warranty Administrator of Nevada, Inc. dba Choice
Home Warranty

This company advised us that they have filed a dba under their name in Carson City. The dba name, Choice Home Warranty, was filed with the Carson City Clerk's Office on June 13, 2014 and with Washoe County on June 23, 2014. The company has returned its original Certificate of Registration.

Therefore, I recommend Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty be reissued a Certificate of Registration to act as a service contract provider in the state of Nevada in accordance with Chapter 690C of the Nevada Revised Statutes with their dba name filed.

*7/8/14
This was
at the request
of the Division,
recommend
approval
eb*

CHW073091

AA000343

STATE OF NEVADA
DEPARTMENT OF
BUSINESS & INDUSTRY
DIVISION OF INSURANCE

Memo

Date: 9/17/2010
To: Brett J. Barratt, Commissioner of Insurance
From: Dolores Bennett, Insurance Examiner
Re: Service Contract Provider Application:
Home Warranty Administrator of Nevada, Inc.

Home Warranty Administrator of Nevada, Inc.
service contract provider on September 2, 2010

We have issued pending Service Contract Provider

The applicant has submitted all the required n

- \$1,000 registration fee
- \$1,300 Fund for Insurance Administration and Enforcement assessment
- Completed application
- List of Executive Officers
- Copy of applicant's Corporate Charter and Articles of Incorporation
- Proof of Financial Responsibility: \$25,000.00 Certificate of Deposit affidavit

Therefore, I recommend that Home Warranty Administrator of Nevada, Inc. be issued a Certificate of Registration to act as a service contract provider in accordance with Chapter 690C of the Nevada Revised Statutes.

After Accounting put it in "Security Deposit Process", which appears to be their standard practice. See Section Register in file.

DB
9-17-10

DB are you having the \$25,000 cash deposited into special "hold" account?

OK 9/17/10

*11/11/10
OK*

CHW073092

AA000344

Memo

Date: 1/26/2017
To: Barbara D. Richardson, Commissioner of Insurance
Through: Rajat Jain, Chief Insurance Examiner *RJ 1/31/17*
Tim Ghan, Assistant Chief Insurance Examiner *TCG 1/31/17*
From: Mary Strong, Management Analyst III *MS*
Re: Provider Renewal Application: **Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty (ORG ID # 113194)**

Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty has submitted a renewal application to be a service contract provider on November 8, 2016.

Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty has been an approved Service Contract Provider in Nevada since November 18, 2010

28 Question 5 of the renewal application asks: *Since the last application, has the applicant or any of the officers listed in question 1 ever: (d) Been fined or had any administrative actions taken by any state or governmental agency or authority in any matter regarding service contracts? (e) Other than traffic infractions, are there any past/pending criminal or civil actions against any of the applicant's officers or directors?*

Upon review of each renewal application submitted since becoming an approved Service Contract Provider Choice Home Warranty responded that there has not been

any action taken against the company. However, there have been multiple state actions:

- Amada Kernahan v. Home Warranty Administrator of Florida, Inc. DBA Choice Home Warranty May 27, 2016, State of New Jersey
- John J. Hoffman v. CHW Group Inc. dba Choice Home Warranty June 9, 2015, State of New Jersey
- State of Oklahoma v. Choice Home Warranty February 7, 2014, State of Oklahoma
- State of Washington Office of Insurance Commissioner v. CHW Group, Inc. dba Choice Home Warranty January 27, 2010, State of Washington

It appears that Home Warranty Administrator of Nevada dba Choice Home Warranty has falsified their renewal application. This is a violation of NRS 686A.070 which states *Falsification of records or financial statements prohibited; penalty,*

(1) *A person subject to regulation under this Code shall not knowingly make or cause to be made any false entry of a material fact in any book, report or statement of any person or knowingly omit to make a true entry of any material fact pertaining to such person's business in any book, report or statement of such person.*

(2) *A person shall not knowingly file with any supervisory or other public officer, or knowingly make, publish, disseminate, circulate or deliver to any person, or place before the public, or knowingly cause directly or indirectly, to be made, published, disseminated, circulated, delivered to any person, or placed before the public, any false material statement of fact as to the financial condition of a person.*

(3) *Any person who violates, or with like intent, aids or abets any violation of this section is guilty of a gross misdemeanor.*

NRS 686A.070 is applicable to Chapter 690C pursuant to NRS 690C.120.

Therefore, I recommend that the Certificate of Registration for Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty be revoked as a service contract provider in the state of Nevada in accordance with NRS 690C.325 *Administrative fines; suspension, limitation, revocation or refusal to renew certificate of registration*

(1)The Commissioner may refuse to renew or may suspend, limit or revoke a provider's certificate of registration if the Commissioner finds after a hearing thereon, or upon waiver of hearing by the provider hat the providers has:

(a) Violated or failed to comply with any awful order of the Commissioner;
(Added to NRS by 2011, 3385)

Attached are copies of Choice Home Warranty's pending renewal application and all state actions.

From: Elena Ahrens
Sent: Friday, April 25, 2014 11:52 AM
To: 'VictorM@ChoiceHomeWarranty.com'
Cc: Derick Dennis; Ted Bader
Subject: RE: Ashok Mirchandani

Victor,

Thank you for working with the Division on this matter. It is appreciated.

I would like to talk to you sometime today on another matter. The Division would like to work with you regarding having an official dba of Choice Home Warranty. I have stopped the issuance of a C&D and want to remedy this situation from occurring in the future. Are you available for a teleconference later today?

Elena Ahrens, Chief
Property & Casualty Section
Nevada Division of Insurance
1818 College Parkway
Carson City, NV 89701
eahrens@doi.nv.gov
(775) 687-0764

From: VictorM@ChoiceHomeWarranty.com [mailto:victorm@choicehomewarranty.com]
Sent: Friday, April 25, 2014 7:25 AM
To: Elena Ahrens
Subject: Ashok Mirchandani

Ms. Ahrens,

I am pleased to report the CHW team has reached a mutually acceptable resolution with Mr. Mirchandani.

CHW has agreed to reimburse Mr. Mirchandani for the two claims in question. Please note CHW policy clearly stated they are non-covered items. Hence the team has advised Mr. Mirchandani that in the future we will and must adhere to the policy. Copies of our policy and T&C's have been resent to Mr. Mirchandani for his reference and review.

Mr. Mirchandani was pleased with the courtesy CHW has extended and we consider the matter resolved.

Thank you for your help in this matter.

Sincerely,

Victor Mandalawi

Choice Home Warranty | President
1090 King Georges Post Rd
Edison, NJ 08837
T: 732-379-5303

From: Elena Ahrens
Sent: Friday, April 25, 2014 12:46 PM
To: 'VictorM@ChoiceHomeWarranty.com'
Cc: Derick Dennis; Ted Bader
Subject: RE: Ashok Mirchandani

Victor,

I have scheduled a teleconference call for Monday, April 28, 2014, at 3:00 p.m. PDT. Call (775) 687-0764 at the designated date and time.

Please reply to this e-mail accepting this teleconference.

Elena Ahrens, Chief
Property & Casualty Section
Nevada Division of Insurance
1818 College Parkway
Carson City, NV 89701
eahrens@doi.nv.gov
(775) 687-0764

From: VictorM@ChoiceHomeWarranty.com [mailto:victorm@choicehomewarranty.com]
Sent: Friday, April 25, 2014 9:10 AM
To: Elena Ahrens
Subject: Re: Ashok Mirchandani

Elena,

I did not realize there was another matter at hand, thank you for stopping the C&D.

I can make myself available on Monday anytime between 3 through 6PM if that's acceptable to you. Please let me know.

I really appreciate you working with us.

Sincerely,

Victor

On Apr 25, 2014, at 11:51 AM, "Elena Ahrens" <eahrens@doi.nv.gov> wrote:

Victor,

Thank you for working with the Division on this matter. It is appreciated.

I would like to talk to you sometime today on another matter. The Division would like to work with you regarding having an official dba of Choice Home Warranty. I have stopped the issuance of a C&D and

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Elena Ahrens, Chief
Property & Casualty Section
Nevada Division of Insurance
1818 College Parkway
Carson City, NV 89701
eahrens@doj.nv.gov
(775) 687-0764

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Subject: Ashok Mirchandani

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Sincerely,

Victor Mandalawi

Choice Home Warranty | President
1090 King Georges Post Rd
Edison, NJ 08837
T: 732-379-5303

From: Derick Dennis
Sent: Wednesday, June 25, 2014 1:28 PM
To: 'VictorM@ChoiceHomeWarranty.com'
Cc: Ted Bader; Elena Ahrens
Subject: RE: Ashok Mirchandani

Hi Victor,

I have not heard back from you in a while. Last time we spoke on a conference call with Elena, you said you would be filing a dba under Home Warranty Administrator of Nevada, Inc. for Choice Home Warranty. Have you done this yet? Please let me know.

Thanks,

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

From: Elena Ahrens
Sent: Friday, April 25, 2014 8:52 AM
To: 'VictorM@ChoiceHomeWarranty.com'
Cc: Derick Dennis; Ted Bader
Subject: RE: Ashok Mirchandani

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Nevada Division of Insurance
1818 College Parkway
Carson City, NV 89701
eahrens@doi.nv.gov
(775) 687-0764

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Sent: Friday, April 25, 2014 7:25 AM

To: Elena Ahrens
Subject: Ashok Mirchandani

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Choice Home Warranty | President
1090 King Georges Post Rd
Edison, NJ 08837
T: 732-379-5303

From: VictorM@ChoiceHomeWarranty.com
To: Derick Dennis
Sent: Wednesday, June 25, 2014 1:28 PM
Subject: Read; RE: Ashok Mirchandani

Your message was read on Wednesday, June 25, 2014 10:28:08 AM (GMT-08:00) Pacific Time (US & Canada).

From: VictorM@ChoiceHomeWarranty.com
Sent: Wednesday, June 25, 2014 3:41 PM
To: Derick Dennis
Subject: RE: Ashok Mirchandani
Attachments: NV Filing Rcpt - Washoe.pdf; NV Filing Rcpt - Carson City.pdf

Hi Dennis,

Hope all is well.

Attached are certified copies of the Nevada DBAs for Washoe County and Carson City. The Clark County DBA has been submitted as well, and we will advise as soon as we receive confirmation from the county.

Please do not hesitate to contact me anytime.

Sincerely,

Victor Mandalawi | President
1090 King Georges Post Rd
Edison, NJ 08837

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Thanks,

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Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

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Thank you for your help in this matter.

Sincerely,

Victor Mandalawi

Choice Home Warranty | President
1090 King Georges Post Rd
Edison, NJ 08837
T: 732-379-5303

CORPORATION, LLC, BUSINESS TRUST & LEGAL ENTITIES**CERTIFICATE OF BUSINESS: FICTITIOUS FIRM NAME**

* * *THIS CERTIFICATE EXPIRES 5 YEARS FROM FILE DATE * * *

(If renewing, expires 5 years from original file date unless it has lapsed)

☐ Renewal☒ New Filing

THE UNDERSIGNED does hereby certify that IT IS
 conducting a Residential Service Contract business
 at 1090 King Georges Post Road, Building 10, Edison, NJ 08837
(Physical street address, City) (State) (Zip code)

under the fictitious firm name of:
Choice Home Warranty

and that said firm is composed of the following legal entity* (or entities) whose mailing address, signing officer's name, and title are as follows:

Legal Entity Name: HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.
(Legal entity must state name exactly as it is on file in state of incorporation)

Entity Mailing Address: 1090 King Georges Post Road, Building 10, Edison, NJ 08837

Signing Officer Name: Victor Mandalawi

Signing Officer Title: President

FOR ADDITIONAL OWNERS, PLEASE USE ADDITIONAL PAGES

Alternate Mailing Address: _____
(PO Box or address other than one listed above)

Prior Related DBA Filing (if applicable): _____

WITNESS my hand this 16th day of May, 20 14.

The undersigned hereby swears under penalty of perjury that he/she has authority to sign on behalf of and to bind the above-named legal entity to a contract.

X

Signature of authorized officer

STATE OF New Jersey
 COUNTY OF Middlesex ss.

On this 16 day of May, 20 14, personally appeared before me, a Notary Public:

Victor Mandalawi

(Name of individual whose signature is being notarized)

who acknowledged that he/she executed the above instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official stamp at my office in
 the County of Middlesex the day and year in this certificate first above written.

Signature of Notary Public

MIRNA CARABALLO
 NOTARY PUBLIC OF NEW JERSEY
 My Commission Expires 7/10/2017

Filing # 143265

06/23/2014 03:39:34 PM FFNC

Page 1 of 1

FILED - Nancy Parent, Washoe County Clerk By [Signature]\$26.50 CK

CHW073105

AA000356

CERTIFIED COPY

The foregoing document is a full, true and correct copy of the original on file and of record in my office.

Date: June 23, 2014

NANCY PARENT, County Clerk in and for the County of Washoe, State of Nevada.

By Catherine Smith
Deputy Clerk

Pursuant to NRS 239B.030 the SSN may be redacted, but in no way affects the legality of the document.

CHW073106

AA000357

Certificate of Business: Fictitious Firm Name

Please Print or Type

The undersigned do hereby certify that HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.
 (Name of individual, corporation, partnership, or trust)
 located at 1090 King Georges Post Road, Building 10, Edison, NJ 08837 is conducting business in Carson City,
 (Street Address of Business or Residence)
 Nevada, under the fictitious name of Choice Home Warranty
 (Fictitious Firm Name)

and that said firm is composed of the following person(s) whose name(s) and address(es) are as follows:
 By signing below I do solemnly swear (or affirm), under penalty of perjury, that all statements made in this document are true.

1. Victor Mandalawi President [Signature] 5/16/14
 Full Name and Title Signature Date
1090 King Georges Post Rd Building 10 Edison, NJ 08837
 Street Address City, State, Zip
 Mailing Address, if different from above City, State, Zip
2. _____
 Full Name and Title Signature Date
 Street Address City, State, Zip
 Mailing Address, if different from above City, State, Zip
3. _____
 Full Name and Title Signature Date
 Street Address City, State, Zip
 Mailing Address, if different from above City, State, Zip
4. _____
 Full Name and Title Signature Date
 Street Address City, State, Zip
 Mailing Address, if different from above City, State, Zip

CERTIFIED COPY

4. The document to which this certificate is attached
 is a full, true and correct copy of the original
 file and of record in my office.
 Full Name and Title Signature Date
 Street Address Date: June 13, 2014 City, State, Zip
 Mailing Address, if different from above City, State, Zip

By Sabrina Wheeler, Deputy
 State of New Jersey
 County of Middlesex

On this 16 day of May, AD, 2014, before me, Mirna Caraballo a Notary Public in and for the said County and State, residing therein, duly commissioned and sworn, personally appeared:

Victor Mandalawi
 known to me to be the person(s) whose name subscribed to the within instrument and acknowledged to me that he(he)(she)(they) has (have) executed the same freely and voluntarily and for the uses and purposes therein mentioned. In Witness whereof, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

[Signature] Expiration date _____
MIRNA CARABALLO
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 7/10/2017

Mail or Return Original Certificate to: Carson City Business License, 108 E. Proctor St., Carson City, NV 89701 with \$20.00 filing fee

CHW073107

AA000358

From: Derick Dennis
Sent: Wednesday, June 25, 2014 4:10 PM
To: 'VictorM@ChoiceHomeWarranty.com'
Cc: Elena Ahrens
Subject: RE: Ashok Mirchandani

Victor,

Thank you for the copies of the filings. Can you please send your original Certificate of Registration back to me; we are going to have a new Certificate issued to you showing Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty. Please let me know if you have any questions.

Thanks,

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

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Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

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Sent: Friday, April 25, 2014 8:52 AM
To: 'VictorM@ChoiceHomeWarranty.com'
Cc: Derick Dennis; Ted Bader
Subject: RE: Ashok Mirchandani

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Property & Casualty Section
Nevada Division of Insurance
1818 College Parkway
Carson City, NV 89701
eahrens@doi.nv.gov
(775) 687-0764

From: VictorM@ChoiceHomeWarranty.com [<mailto:VictorM@ChoiceHomeWarranty.com>]
Sent: Friday, April 25, 2014 7:25 AM
To: Elena Ahrens
Subject: Ashok Mirchandani

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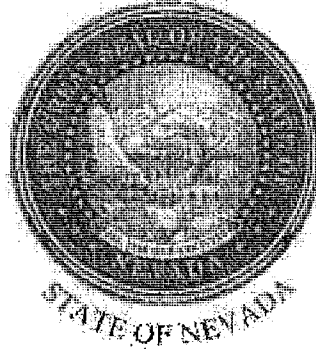
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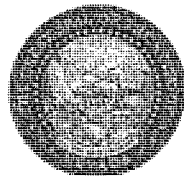
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SECRETARY OF STATE



CORPORATE CHARTER

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.**, did on July 23, 2010, file in this office the original Articles of Incorporation; that said Articles of Incorporation are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 23, 2010.

A handwritten signature of Ross Miller in black ink.

ROSS MILLER
Secretary of State

Certified By: GJ Jalliet
Certificate Number: G20100723-1034
You may verify this certificate
online at <http://www.nvsos.gov/>

CHW073114

AA000365



ROSS MILLER
Secretary of State
206 North Carson Street
Carson City, Nevada 89701-4299
(775) 684 6708
Website: www.nvsos.gov

Articles of Incorporation (PURSUANT TO NRS CHAPTER 78)

Filed in the office of	Document Number
<i>[Signature]</i>	20100545373-70
Ross Miller Secretary of State State of Nevada	Filing Date and Time 07/23/2010 9:10 AM
	Entity Number E0349562010-2

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Corporation:	HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.		
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: REGISTERED AGENT SOLUTIONS, INC. <input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity 4625 WEST NEVSO DRIVE, SUITE 2 LAS VEGAS Nevada 89103 Street Address City State Zip Code Mailing Address (if different from street address) City State Zip Code		
3. Authorized Stock: (number of shares corporation is authorized to issue)	Number of shares with par value:	Par value per share: \$	Number of shares without par value: 200
4. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) VICTOR MANDALAWI Name 1420 AVENUE P BROOKLYN NY 11229 Street Address City State Zip Code 2) : Name Street Address City State Zip Code		
5. Purpose: (optional; see instructions)	The purpose of the corporation shall be:		
6. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)	STEVEN WEISS X <i>[Signature]</i> Name Incorporator Signature 1222 AVENUE M, SUITE 201 BROOKLYN NY 11230 Address City State Zip Code		
7. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. X <i>[Signature]</i> 07/22/2010 Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date		

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 Articles
Revised on 7-1-08

CHW073115

AA000366

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Sent: Thursday, June 26, 2014 11:01 AM
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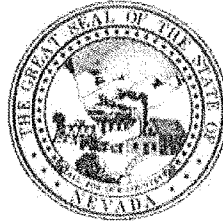
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Service Contract Provider
Certificate of Registration
DEPARTMENT OF BUSINESS AND INDUSTRY



DIVISION OF INSURANCE

This certificate with affixed seal is evidence of registration for

Home Warranty Administrator of Nevada, Inc.

Nevada Company ID No. 113194

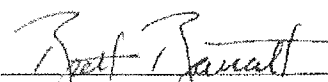
to act as a service contract provider in the state of Nevada in accordance with Chapter 690C of the Nevada Revised Statutes.

This Certificate shall remain in force unless suspended, revoked, terminated or voluntarily surrendered. This Certificate shall at all times remain the property of the State of Nevada. Upon any termination, suspension or revocation thereof, the holder shall promptly deliver or surrender this Certificate of Registration to the Commissioner of Insurance.



Dated at Carson City, Nevada

this 18th day of November, 2010


Commissioner of Insurance

Effective Date: NOVEMBER 18, 2010

Renewal Date is NOV. 18th of Each Year

CHW073124

AA000375

From: Derick Dennis
Sent: Tuesday, July 08, 2014 11:19 AM
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Elena Ahrens, Chief
Property & Casualty Section
Nevada Division of Insurance
1818 College Parkway
Carson City, NV 89701
eahrens@doi.nv.gov
(775) 687-0764

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Sent: Friday, April 25, 2014 7:25 AM
To: Elena Ahrens
Subject: Ashok Mirchandani

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Edison, NJ 08837
T: 732-379-5303

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Subject: RE: Ashok Mirchandani

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STATE OF NEVADA
DEPARTMENT OF
BUSINESS & INDUSTRY

DIVISION OF INSURANCE

Memo

Date: 7/8/2014
To: Scott J. Kipper, Commissioner of Insurance
From: Derick Dennis, Management Analyst
Re: Name change (Org. ID # 113194)

From: Home Warranty Administrator of Nevada, Inc.
To: Home Warranty Administrator of Nevada, Inc. dba Choice
Home Warranty

This company advised us that they have filed a dba under their name in Carson City. The dba name, Choice Home Warranty, was filed with the Carson City Clerk's Office on June 13, 2014 and with Washoe County on June 23, 2014. The company has returned its original Certificate of Registration.

Therefore, I recommend Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty be reissued a Certificate of Registration to act as a service contract provider in the state of Nevada in accordance with Chapter 690C of the Nevada Revised Statutes with their dba name filed.

*7/8/14
This was
at the request
of the Division,
recommend
approval
ed*

CHW073135

AA000386

From: VictorM@ChoiceHomeWarranty.com
Sent: Tuesday, July 08, 2014 5:38 PM
To: Derick Dennis
Subject: RE: Ashok Mirchandani

Hi Derick,

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Thanks,

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BRIAN SANDOVAL
Governor

STATE OF NEVADA



BRUCE H. BRESLOW
Director

SCOTT J. KIPPER
Commissioner



COPY

DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INSURANCE

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(775) 687-0700 • Fax (775) 687-0787
Website: doi.nv.gov
E-mail: insinfo@doi.nv.gov

July 14, 2014

Attn: Victor Mandalawi, President
Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Re: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
Nevada Company ID No. 113194

Dear Mr. Mandalawi:

The Nevada Division of Insurance has updated the name listed on your Service Contract Provider "Certificate of Registration," which previously listed the company name as Home Warranty Administrator of Nevada, Inc. to include your dba name filed in Carson City:

Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty

I have attached a copy of your updated Certificate of Registration showing that change. Please keep it in a safe place. There has been no change to your Nevada Company ID Number 113194. Thank you for your help in this matter.

Sincerely,

Derick Dennis
Management Analyst III
Phone: (775) 687-0769
E-mail: ddennis@doi.nv.gov

Attachment

Certified Mail # 7012 2920 0001 8640 6996

CHW073147

AA000398

U.S. Postal Service
CERTIFIED MAIL, RECEIPT

Download Mail Copy the Insurance Coverage Provided
For Delivery Information visit our website at www.usps.com

Class Mail
Postage & Fees Paid
1 No. G-10

10X

DIV. OF INS.
Property & Casualty

Postage \$
Certified Fee
Return Receipt no
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)

Attn: Victor Mandala, President
Home Warranty Administrator of Nevada, Inc.
Choice Home Warranty
90 WASHINGTON VALLEY RD
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United States
2012 2920 0001 8640 6995

CHW073148

AA000399

Service Contract Provider
Certificate of Registration
DEPARTMENT OF BUSINESS AND INDUSTRY



COPY

DIVISION OF INSURANCE

This certificate with affixed seal is evidence of registration for

Home Warranty Administrator of Nevada, Inc. dba Choice Home
Warranty

Nevada Company ID No. 113194

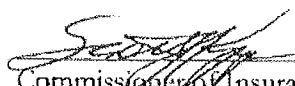
to act as a service contract provider in the state of Nevada in accordance with Chapter
690C of the Nevada Revised Statutes.

This Certificate shall remain in force unless suspended, revoked, terminated or
voluntarily surrendered. This Certificate shall at all times remain the property of the
State of Nevada. Upon any termination, suspension or revocation thereof, the holder
shall promptly deliver or surrender this Certificate of Registration to the
Commissioner of Insurance.



Dated at Carson City, Nevada

this 14th day of July, 2014


Commissioner of Insurance

Effective Date: July 14th, 2014

Renewal Date is November 18th of Each Year

CHW073149

AA000400

From: VictorM@ChoiceHomeWarranty.com
Sent: Monday, July 14, 2014 5:00 PM
To: Derick Dennis
Subject: RE: Ashok Mirchandani

Hi Derick,

My pleasure, thanks for all your help.

Best regards,

Victor

From: Derick Dennis [mailto:ddennis@doi.nv.gov]
Sent: Monday, July 14, 2014 4:51 PM
To: VictorM@ChoiceHomeWarranty.com
Subject: RE: Ashok Mirchandani

Hi Victor,

I'm sending out your updated Certificate of Registration via certified mail today. Thank you for your assistance in getting the dba name taken care of. Please let me know if you have any questions.

Thanks,

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

From: VictorM@ChoiceHomeWarranty.com [mailto:victorm@choicehomewarranty.com]
Sent: Tuesday, July 08, 2014 2:38 PM
To: Derick Dennis
Subject: RE: Ashok Mirchandani

Hi Derick,

Thank you for the update, I'm glad you received it and looking forward to receiving the updated certificate.

Thanks,

Victor

From: Derick Dennis [<mailto:ddennis@doi.nv.gov>]
Sent: Tuesday, July 08, 2014 4:20 PM
To: VictorM@ChoiceHomeWarranty.com
Subject: RE: Ashok Mirchandani

Victor - I just received the certificate. I will have a new one issued to you shortly.

Thanks,

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

From: Derick Dennis
Sent: Tuesday, July 08, 2014 8:19 AM
To: 'VictorM@ChoiceHomeWarranty.com'
Subject: RE: Ashok Mirchandani

Victor – have you sent the Certificate of Registration via FedEx yet? I have not seen it come my way.

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

From: VictorM@ChoiceHomeWarranty.com [<mailto:VictorM@ChoiceHomeWarranty.com>]
Sent: Thursday, June 26, 2014 9:41 AM
To: Derick Dennis
Subject: RE: Ashok Mirchandani

Derick,

Attached please find the scanned copy of the certificate, I will Fedex you the original copy today.

Please do not hesitate to contact me should you require anything further.

Thanks,

Victor

From: Derick Dennis [<mailto:ddennis@doi.nv.gov>]
Sent: Thursday, June 26, 2014 11:05 AM

To: VictorM@ChoiceHomeWarranty.com
Subject: RE: Ashok Mirchandani

Victor – I need the original copy mailed back. The Insurance Commissioner will reissue a new one. In order for me to request a new one to be issued I have to present the old copy.

Thanks,

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

From: VictorM@ChoiceHomeWarranty.com [<mailto:victorm@choicehomewarranty.com>]
Sent: Thursday, June 26, 2014 8:01 AM
To: Derick Dennis
Subject: RE: Ashok Mirchandani

Derick,

My apologies for misunderstanding, to be clear do you need the original copy mailed to you or would a scan suffice?

Thanks,

Victor

From: Derick Dennis [<mailto:ddennis@doi.nv.gov>]
Sent: Thursday, June 26, 2014 10:15 AM
To: VictorM@ChoiceHomeWarranty.com
Subject: RE: Ashok Mirchandani

Victor –

I need the original Certificate of Registration issued by the Insurance Commissioner back when you first registered. A new certificate will be issued to you. I do not need a copy of the articles of incorporation that you just sent.

Thanks,

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

From: VictorM@ChoiceHomeWarranty.com [<mailto:victorm@choicehomewarranty.com>]
Sent: Wednesday, June 25, 2014 4:24 PM
To: Derick Dennis
Subject: RE: Ashok Mirchandani

Dennis,

Attached, please find the certificate and articles of incorporation.

Please contact me should you require anything further.

Thanks,

VM

From: Derick Dennis [<mailto:ddennis@doi.nv.gov>]
Sent: Wednesday, June 25, 2014 4:10 PM
To: VictorM@ChoiceHomeWarranty.com
Cc: Elena Ahrens
Subject: RE: Ashok Mirchandani

Victor,

Thank you for the copies of the filings. Can you please send your original Certificate of Registration back to me; we are going to have a new Certificate issued to you showing Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty. Please let me know if you have any questions.

Thanks,

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

From: VictorM@ChoiceHomeWarranty.com [<mailto:victorm@choicehomewarranty.com>]
Sent: Wednesday, June 25, 2014 12:41 PM
To: Derick Dennis
Subject: RE: Ashok Mirchandani

Hi Dennis,

Hope all is well.

Attached are certified copies of the Nevada DBAs for Washoe County and Carson City. The Clark County DBA has been submitted as well, and we will advise as soon as we receive confirmation from the county.

Please do not hesitate to contact me anytime.

Sincerely,

Victor Mandalawi | President
1090 King Georges Post Rd
Edison, NJ 08837

From: Derick Dennis [<mailto:ddennis@doi.nv.gov>]
Sent: Wednesday, June 25, 2014 1:28 PM
To: VictorM@ChoiceHomeWarranty.com
Cc: Ted Bader; Elena Ahrens
Subject: RE: Ashok Mirchandani

Hi Victor,

I have not heard back from you in a while. Last time we spoke on a conference call with Elena, you said you would be filing a dba under Home Warranty Administrator of Nevada, Inc. for Choice Home Warranty. Have you done this yet? Please let me know.

Thanks,

Derick Dennis
Management Analyst III
Property & Casualty
Nevada Division of Insurance
1818 College Pkwy., Suite 103
Carson City, NV 89706-7986
Direct (775) 687-0769 Main (775) 687-0700
Fax (775) 687-0787
ddennis@doi.nv.gov

From: Elena Ahrens
Sent: Friday, April 25, 2014 8:52 AM
To: 'VictorM@ChoiceHomeWarranty.com'
Cc: Derick Dennis; Ted Bader
Subject: RE: Ashok Mirchandani

Victor,

Thank you for working with the Division on this matter. It is appreciated.

I would like to talk to you sometime today on another matter. The Division would like to work with you regarding having an official dba of Choice Home Warranty. I have stopped the issuance of a C&D and want to remedy this situation from occurring in the future. Are you available for a teleconference later today?

Elena Ahrens, Chief
Property & Casualty Section
Nevada Division of Insurance
1818 College Parkway
Carson City, NV 89701
eahrens@doi.nv.gov
(775) 687-0764

From: VictorM@ChoiceHomeWarranty.com [mailto:victorm@choicehomewarranty.com]
Sent: Friday, April 25, 2014 7:25 AM
To: Elena Ahrens
Subject: Ashok Mirchandani

Ms. Ahrens,

I am pleased to report the CHW team has reached a mutually acceptable resolution with Mr. Mirchandani.

CHW has agreed to reimburse Mr. Mirchandani for the two claims in question. Please note CHW policy clearly stated they are non-covered items. Hence the team has advised Mr. Mirchandani that in the future we will and must adhere to the policy. Copies of our policy and T&C's have been resent to Mr. Mirchandani for his reference and review.

Mr. Mirchandani was pleased with the courtesy CHW has extended and we consider the matter resolved.

Thank you for your help in this matter.

Sincerely,

Victor Mandalawi

Choice Home Warranty | President
1090 King Georges Post Rd
Edison, NJ 08837
T: 732-379-5303

BRETT J. BARRATT
Commissioner of Insurance

DIANNE CORNWALL
Director



1818 College Parkway, Suite 103

Carson City, Nevada 89706

(775) 687-0700 • Fax (775) 687-0787

Website: doi.nv.gov

E-mail: insinfo@dol.state.nv.us

November 30, 2010

Certified # 7006 2150 0000 6993 3791

Re: Home Warranty Administrator of Nevada, Inc. (Nevada Company ID No. 113194)
Service Contract Provider Application – Filing # 22146 – Approved
Service Contract Form filing – Filing # 22147 – Approved

The Nevada Commissioner of Insurance has approved the Service Contract Provider Application for Home Warranty Administrator of Nevada, Inc. The Certificate of Registration, dated November 18, 2010, is enclosed. Please note the Nevada company identification number on the Certificate.

You must reference that number on future "Property & Casualty Transmittal Document" forms for paper filings, or online in SERFF for electronic filings, when submitting new service contracts for approval.

NOTE: We have also reviewed the service contract # HWAADMIN-8/2/10 that you submitted with your application and we have approved that service contract for use. Please contact me if you have any questions.

Sincerely,

Edouard Bennett

Dolores Bennett, ARC, ARM, AIS, AINS

Insurance Examiner

Division of Insurance

Telephone: (775) 687-0763

E-mail: dbenneu@doi.state.nv.us

Enclosure: Certificate of Registration:
Approved form filing - Property & Casualty Transmittal Document

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to: or on the front if space permits. Attach this card to the back of the mailpiece so that we can return the card to you. Print your name and address on the reverse Item 4 if Restricted Delivery is desired. Complete items 1, 2, and 3. Also complete</p>		<p>A. Signature <i>[Signature]</i></p> <p>B. Received by (Printed Name) <i>[Signature]</i></p> <p>C. Date of Delivery <i>[Signature]</i></p> <p>D. Is delivery address different from item 1? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If YES, enter delivery address below: Yes <input type="checkbox"/> No <input type="checkbox"/></p>	
<p>2. Article Number (Transfer from service label) 7006 23.50 0000 6993 379L</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>5. Date of Delivery <i>[Signature]</i></p>	

Victor Manalaw, President
 Home War, my Administrator of Nevada, Inc.
 50 WASHINGTON VALLEY RD
 MEDFORD, NJ 07921-2115

USPS - 07021
 JAN 16 2010

102505-02-M-1540 Domestic Return Receipt PS Form 3811, February 2004

U.S. Postal Service®
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information, visit us online at [usps.com](#).

0-8

EIM UNITAS

Postmark	Date
372	SEP 26 2006

Airm: Victor Mandelaw, President
Home Warranty Administrator of Nevada, Inc.
90 WASHINGTON VALLEY RD
BEIDMINSTER NJ 07921-2118

13 SEP 26 2006

CHW073157

AA000408

11-30-2010

Company Information Inquiry

Page 1 of 2

State of Nevada

Name: HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.

Display Results For: All Information

Company Details

Company Details						NAIC Group Number
Name	EIN	NAIC ID				
HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.		90-0594950				
Status	Effective Date	Inactivation Reason	Ownership Type	Ownership Type Effective Date	Domicile State	Domicile State Effective Date
Active	11-18-2010				Nevada	
Incorporation Date	Incorporated Country	US Entry State	Original License Date	Policy Type	Department Action	For Profit
07-23-2010						Yes
Company ID	Email Address	Web Site				
113194						
Charter Number	PEO Group Number	Primary Member				
		No				

Company Types and Authorized Lines

Company Type	Company Category	License Number	Status	Status Date	Original Issue Date	Inactivation Reason
Service Contract Provider	Service Organization		Active	11-18-2010	11-18-2010	

Contact Information

Mailing	Phone Number	Fax Number	Toll Free Number
VICTOR MANDALAWI 90 WASHINGTON VALLEY RD BEDMINSTER, NJ 07921-2118	866-681-3656 Extension	732-579-5961	Extension
Email Address	Communication Preference	Communication Preference Type	
vmandalawi@homewarrantyadministrators.com	Postal Mail		
Statutory Home Office	Phone Number	Fax Number	Toll Free Number
VICTOR MANDALAWI 90 WASHINGTON VALLEY RD BEDMINSTER, NJ 07921-2118	866-681-3656 Extension	732-579-5961	Extension
Email Address	Communication Preference	Communication Preference Type	
vmandalawi@homewarrantyadministrators.com	Postal Mail		

Applications

Appl ID	Company Type	Received Date	Status	Status Date	Effective Date	Expiration Date	File Cmt Date
Application Type		Application Sub Type		Responsible Staff Member			
3345	Service Contract Provider	09-02-2010	Approved	11-18-2010	11-18-2010		
New Request				Bennett, Dolores E			

Rate and Form Filings

Filing ID	Company Type	Filing Type	Product Category
Status		Closure Type	Flagged

CHW073158

AA000409

11-30-2010

Company Information Inquiry

Page 2 of 2

State of Nevada**Name:** HOME WARRANTY ADMINISTRATOR OF NEVADA, INC.**Display Results For:** All Information

22147	Service Contract Provider	PC Form	33.0 Other Lines of Business
Open			No
22146	Service Contract Provider	PC Form	33.0 Other Lines of Business
Open			No

Status History

Status	Begin Date	Inactivation Reason
Pending	09-15-2010	


Comments

Date	Comment
11-10-2010	Submitted file to Elena Ahrens for review on 9-17-10. db

CHW073159

AA000410

Service Contract Provider Information

ORG ID	113194		Add Record	Approved Contracts	Home Service Agreement # HW AADN
Company	Home Warranty Administrator of Nevada, Inc.				
Contact	Victor Mandalawi, President				Comments:
Attention					
Address:	90 WASHINGTON VALLEY RD				Company Status:
City:	BEDMINSTER			Status Date:	
State:	NJ				
Zip Code	07921-2118				
Contact Information:			Important Dates		
Phone #:	(866) 681-3656	Ext.		Approved	11/18/2010
Fax #:	(732) 579-5961			Through:	11/18/2011
E-mail:	vmandalawi@homewarranty.com	Mailed Renew Reminder			
Company Information:					
Date Incorporated	7/23/2010	Date App Submitted	9/2/2010		
Administrator:	Self				
Financial Responsibility	Option 2: \$25,000 cash deposit with Division (Receipted 9/14/10) and reserve account affidavit.				

Alternate email: info@homewarrantyad	
New Approved	Follow-up
11/18/2010	<input type="checkbox"/> 2nd Re

Statistical Information:	
Fiscal Year 2007 Contracts	Revenue
# Sold	
Fiscal Year 2008 Contracts	Revenue
# Sold	0
Fiscal Year 2009 Contracts	Revenue
# Sold	0
Date Company Stopped Writing Business (as of 7/1/06):	
SC type	

CHW073160

AA000411



AIN-8/2/10 (Approved: 11/22/10)

administrators.com

Renewal Letters Mailed:

Reminder ☐ Warning ☐ Enforcement

Claims Pd

\$0.00

Claims Pd

\$0.00

\$0.00

Claims Pd

\$0.00

CHW073161

AA000412

Service Contract Provider
Certificate of Registration
DEPARTMENT OF BUSINESS AND INDUSTRY



DIVISION OF INSURANCE

This certificate with affixed seal is evidence of registration for

Home Warranty Administrator of Nevada, Inc.

Nevada Company ID No. 113194


to act as a service contract provider in the state of Nevada in accordance with Chapter 690C of the Nevada Revised Statutes.

This Certificate shall remain in force unless suspended, revoked, terminated or voluntarily surrendered. This Certificate shall at all times remain the property of the State of Nevada. Upon any termination, suspension or revocation thereof, the holder shall promptly deliver or surrender this Certificate of Registration to the Commissioner of Insurance.



Dated at Carson City, Nevada

this 18th day of November, 2010



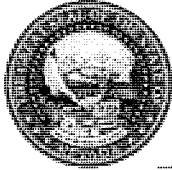
Commissioner of Insurance

Effective Date: November 18, 2010

Renewal Date is Nov. 18th of Each Year

CHW073162

AA000413



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name:
Current Certificate Number: NV
Initial Certificate Issued:

Mailing Address:

Contact:
Phone: Ext.
Fax:
E-mail:

The following questions must be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As) in Nevada. Provide supporting documentation filed with the County Clerk of the county in which the company is doing business.

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application?

Yes ____ No ____

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have there been any changes in the percentage of ownership?

Yes ____ No ____

If yes, please attached a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence
6. Percentage of Company Owned

NDOI-1118

CHW073163

AA000414

4. Have there been any changes in the administrator or designated a new administrator since your **last** application?

Yes ____

No ____

Current Administrator is listed as:

Self

List any changes to the current administrator **or** list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

____ () _____

5. Since the last application, has the applicant or any of the officers listed in question 1 or 2 ever:

(a) Been convicted of a felony or any misdemeanor?

Yes ____ No ____

(b) Been insolvent or adjudged a bankrupt?

Yes ____ No ____

(c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority?

Yes ____ No ____

(d) Been fined or had any administrative actions taken by any state or governmental agency or authority in any matter regarding service contracts?

Yes ____ No ____

(e) Other than traffic infractions, are there any past/pending criminal or civil actions, in professional capacity, against any of the applicant's officers or directors?

Yes ____ No ____

Note: If any part of Question 4 or 5 is answered "Yes," attach an explanation.

6. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:

Option ____:

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below.

No ____ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells, or offers for sale. Each Year at Renewal: <i>Submit documentation from the insurer verifying that the policy is still current and in full force.</i>
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: <i>Submit documentation verifying that the security of 40% of unearned gross consideration on all unexpired service contracts sold to Nevada residents. The reserve account shall be maintained exclusively for service contracts in this state. Monthly statements of the reserve account (3 monthly statements) must be submitted to the Division at the end of each calendar quarter.</i>
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: <i>Submit a copy of the most current 10K or 20F form that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.</i>

8. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☐

Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

9. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

If you do not sell your contracts at specific locations, how do you contact the potential customer?

C. Number of service contracts sold to Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

D. If using Financial Security Option 2, complete the following: Unearned gross considerations* on all unexpired service contracts sold to Nevada residents:				
Quarter	Gross Revenue Received from Nevada Residents:	Unearned Gross Considerations	Security Deposit (10% of Unearned Gross Considerations)	Reserve Account (40% of Unearned Gross Considerations)
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

E. Number of service contracts sold to Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

F. Gross Revenue received from Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

G. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2015 \$ _____, _____, _____. _____

Calendar year: 2016 \$ _____, _____, _____. _____

H. Number of customer complaints by Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

10. How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____, 20____

 Name of Service Contract Provider

Telephone No: _____

By

 Signature of Officer in full

 Signature of Officer in full

 Print Name and Title

 Print Name and Title

This renewal application must be verified and signed by two of the officers listed/named on file with the Division of Insurance in Question 2 for service contract business.

NDOI – 1118 Revised 7/5/16



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

The Certificate of Registration is non-transferable.

Fees are non-refundable.

Please make any corrections to your mailing address or contact information below.

Provider Name:

Current Certificate Number: NV

Initial Certificate Issued:

Mailing Address:

Contact:

Phone: Ext.

Fax:

E-mail:

The following questions **MUST** be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As) in Nevada. Provide supporting documentation filed with the County Clerk of the county in which the company is doing business.

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application? Or has an existing executive officer had any change in any of the information previously submitted?

Yes ☐ No ☐

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have there been any changes in the percentage of ownership?

Yes ☐ No ☐

If yes, please attached a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence
6. Percentage of Company Owned

4. Have there been any changes in the administrator or designated a new administrator since your **last** application?

Yes ☐ No ☐

Current Administrator is listed as:

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

5. Since the last application, has the applicant or any of the officers listed in question 1 or 2 in the last 10 years:

- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud?

Yes ☐ No ☐

- (b) Been insolvent or adjudged a bankrupt?

Yes ☐ No ☐

- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority?

Yes ☐ No ☐

- (d) Been fined or had any administrative actions taken by any state or governmental agency or authority in any matter regarding service contracts?

Yes ☐ No ☐

- (e) Other than traffic infractions, are there any past/pending criminal or civil actions, in professional capacity, against any of the applicant's officers or directors?

Yes ☐ No ☐

Note: If any part of Question 4 or 5 is answered "Yes," attach an explanation.

6. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:

Option ____:

Has there been any change in that information/proof of financial responsibility?

Yes ☐ Explain here and attach appropriate documentation for your choice as listed in the table below.

No ☐ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells, or offers for sale. Each Year at Renewal: <u>Submit documentation from the insurer verifying that the policy is still current and in full force.</u> Pursuant to NRS 690C.170(1)(a)(2), the contractual liability policy must contain a provision prohibiting the insurer from terminating the policy until a notice of termination has been mailed or delivered to the Division at least 60 days prior to the termination of the policy.
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. The reserve account must be kept separate from the operating accounts of the provider and must be clearly identified as the "(Provider's Name) Nevada Service Contracts Funded Reserve Account" pursuant to NRS 690C.170(1)(b). A provider shall not use any money in a reserve account for any other purpose other than to pay an obligation of the provider under an unexpired service contract (NRS 690C.170(2)). A provider shall maintain the financial security required until both of the following become true: the provider ceases doing business in Nevada and the provider has performed or otherwise satisfied all liabilities and obligations under all unexpired service contracts issued by the provider (NRS 690C.170(3)). Each Year At Renewal: <u>Submit documentation verifying that the security of 40% of unearned gross consideration on all unexpired service contracts sold to Nevada residents.</u> The reserve account shall be maintained exclusively for service contracts in this state. Monthly statements of the reserve account (3 monthly statements) must be submitted to the Division at the end of each calendar quarter.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: <u>Submit a copy of the most current 10K or 20F form that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.</u>
Please Note	Pursuant to NRS 690C.170(4), if the certificate of registration of a provider has not expired and the provider fails to maintain the financial security or if the financial security is cancelled or lapses, the provider shall not issue or sell a service contract on or after the effective date of such failure until the provider submits to the Commissioner proof satisfactory to the Commissioner that the provider is in compliance with NRS 690C.170.

7. Please review and agree to the following:

- A. The provider agrees to not use any money in a reserve account other than to pay an obligation of the provider under an unexpired service contract. ☐
- B. The provider agrees to maintain the financial security required. ☐
- C. The provider agrees that if the certificate of registration has not expired and the provider fails to maintain the financial security required, including, without limitation, if the financial security is cancelled or lapses, the provider shall not issue or sell a service contract, until the provider submits to the Commissioner proof satisfactory to the Commissioner that the provider is in compliance with NRS 690C.170. ☐

8. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☐
 Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

9. Please provide the following information regarding the service contracts you sell.

- A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

If you do not sell your contracts at specific locations, how do you contact the potential customer?

D. If using Financial Security Option 2, complete the following: Unearned gross considerations* on all unexpired service contracts sold to Nevada residents for the last 8 quarters:				
Quarter	Gross Revenue Received from Nevada Residents:	Unearned Gross Considerations	**Security Deposit (10% of Unearned Gross Considerations)	Reserve Account (40% of Unearned Gross Considerations)
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

****This renewal application must include funds if there is an increase to the security deposit as calculated above.**

E. Number of service contracts sold to Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

F. Gross Revenue received from Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

G. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2015 \$ _____, _____, _____, _____

Calendar year: 2016 \$ _____, _____, _____, _____

H. Number of customer complaints by Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

10. How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____, 20____

Name of Service Contract Provider

Telephone No: _____

By

Signature of Officer in full

Signature of Officer in full

Print Name and Title

Print Name and Title

This renewal application must be verified and signed by two of the officers listed/named on file with the Division of Insurance in Question 2 for service contract business.

SUBSCRIBED and SWORN to before me
this _____ day of _____, _____.
Date Month Year

NOTARY PUBLIC



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste. 103, Carson City, NV 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name: **CornerStone United, Inc.**

Current Certificate Number:

Initial Certificate Issued:

Mailing Address:

Contact:

Phone:

Fax:

E-mail:

The following questions must be answered before your renewal application can be processed.

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application?

Yes ____ No ____

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

2. Have you made any changes in the administrator or designated a new administrator since your **last** application?

Yes ____ No ____ Current Administrator is listed as:

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

CHW073174

AA000425

3. Since the **last** application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ____ No ____
- (b) Been insolvent or adjudged a bankrupt? Yes ____ No ____
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ____ No ____
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ____ No ____
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes ____ No ____

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below: _____

No ____ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Financial Security Options: Service Contract Providers must comply with one of the following financial security options to maintain a Certificate of Registration:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account that contains at all times an amount of money equal to at least 40% of the unearned gross consideration received from Nevada residents for unexpired service contracts <u>and</u> deposit with the Commissioner \$25,000 or 10% of the unearned gross consideration received from Nevada residents for unexpired service contracts, whichever is greater. The security deposited with the Commissioner may be a surety bond, or other securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: Submit updated security deposit with the Commissioner to reflect 10% of unearned gross consideration as June 30, 2014, or \$25,000, whichever is greater, with this renewal, or verify that the current security continues in force in the correct amount.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

6. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☐

Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

7. Please provide the following information regarding the service contracts you sell.

- A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

If you do not sell your contracts at specific locations, how do you contact the potential customer?

- C. Number of service contracts sold to Nevada residents:

Calendar year: 2012 _____

Calendar year: 2013 _____

- D. Gross Revenue received from Nevada residents:

Calendar year: 2012: \$ _____

Calendar year 2013: \$ _____

- E. If Using Financial Security **Option 2**, complete the following:

Unearned gross consideration* on all unexpired service contracts sold to Nevada residents:

As of September 30, 2012: \$ _____

As of December 31, 2012: \$ _____

As of March 31, 2013: \$ _____

As of June 30, 2013: \$ _____

As of September 30, 2013: \$ _____

As of December 31, 2013: \$ _____

As of March 31, 2014: \$ _____

As of June 30, 2014: \$ _____

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

- F. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2012 \$ _____

Calendar year: 2013 \$ _____

- G. Number of customer complaints by Nevada residents:

Calendar year: 2012 _____

Calendar year: 2013 _____

How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____, 20____

Telephone No: _____

**This renewal application must be
verified and signed by one of the
officers listed/named on a prior
application or listed in Question 1
for service contract business**

Name of Corporation

By _____
Signature of Officer in full

Print Name and Title

SERVICE CONTRACT PROVIDER APPLICATION - RENEWAL

STATE OF NEVADA
DEPARTMENT OF BUSINESS & INDUSTRY
DIVISION OF INSURANCE

New Address → 1818 E. College Parkway, Suite 103 ← New Address
Carson City, NV 89706-7986

PHONE # (775) 687-0700

FAX # (775) 687-0787

Brett J. Barratt
Commissioner of Insurance



Brian Sandoval
Governor

Provider Name: **«Company»**
Current Certificate Number: NV **«ORGID»**
Initial Certificate Issued: **«Approved»**

Mailing Address:

Contact: **«Contact»**

«Attn»

«Address»

«City», «State» «zip»

Phone: **«Phone»** Ext. **«ext»**

Fax: **«Fax»**

E-mail: **«email»**

Please make any corrections to your contact or address information above.

**THE FOLLOWING QUESTIONS MUST BE ANSWERED
BEFORE YOUR RENEWAL APPLICATION CAN BE PROCESSED**

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application? Yes ____ No ____
If yes, please attach a list and include the following information:
 1. Name
 2. Title
 3. Date of Birth
 4. Social Security Number
 5. Address of Residence
2. Have you made any changes in the administrator or designated a new administrator since your **last** application?
Yes ____ No ____
Current Administrator is listed as:
«Administrator»

CHW073179

AA000430

List any changes to the original administrator **or** list the names and addresses if new administrator(s) designated.

Attach additional sheets if necessary.

3. Since the **last** application, has applicant or any of the officers listed in question 1 ever:
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud. Yes ____ No ____
- (b) Been insolvent or adjudged a bankrupt? Yes ____ No ____
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ____ No ____
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ____ No ____
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes ____ No ____

If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility: **«Financial»**

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below:

No ____ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

To be issued or maintain a certificate of registration, a provider must comply with one of the following:	
Reference: NRS 690C.170(1)	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit a copy of the <u>current</u> declarations page, highlighting the "Effective" and "Expiration" dates of the policy. If the expiration date of the policy is open-ended, please provide a statement from the insurer verifying that the policy is still current and in full force.
Reference: NRS 690C.170(2)	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Reference: NRS 690C.170(3)	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

6. Please provide the following information regarding the service contracts you sell.
- A. List the service contract form names and form numbers that you sell in Nevada. Attach additional sheets if necessary. _____

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary. _____

If you do not sell your contracts at specific locations, how do you contact the potential customer? _____

- C. Number of service contracts sold to Nevada residents:

Calendar year: 2009 _____

Calendar year: 2010 _____

- D. Service contract revenue – Gross revenue received from Nevada residents:

Calendar year: 2009 \$ _____, _____, _____ • _____

Calendar year: 2010 \$ _____, _____, _____ • _____

- E. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2009 \$ _____, _____, _____ • _____

Calendar year: 2010 \$ _____, _____, _____ • _____

- F. Number of customer complaints by Nevada residents:

Calendar year: 2009 _____

Calendar year: 2010 _____

How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____ 20_____

Name of Corporation

Telephone No: _____

By _____

Signature of Officer in full

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Print Name and Title

CHW073181

AA000432



Department of Business and Industry

Nevada Division of Insurance

788 Fairview Drive, Suite 300, Carson City, Nevada 89701-5491 Phone: (775) 687-4270 Fax: (775) 687-3937 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Part I: Contact Information

Please make any corrections to the contact information below.

Provider Name: «**Company**»

Current Certificate Number: NV «**ORGID**»

Initial Certificate Issued: «**Approved**»

Mailing Address:

«**Attn**»

«**Address**»

«**City**», «**State**» «**zip**»

Contact: «**Contact**»

Phone: «**Phone**»

Ext. «**ext**»

Fax: «**Fax**»

E-mail: «**email**»

Part II: Renewal Questions

The following questions must be answered before your renewal application can be processed

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application? Yes ____ No ____
If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

2. Have you made any changes in the administrator or designated a new administrator since your **last** application?

Yes ____

No ____

Current Administrator is listed as:

«**Administrator**»

List any changes to the original administrator **or** list the names and addresses of the administrators designated. Attach additional sheets if necessary.

CHW073182

AA000433

3. Within the past 10 years, has applicant or any of the officers listed in Question 1 ever:
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? 9Yes 9No
 - (b) Been insolvent or adjudged a bankrupt? 9Yes 9No
 - (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? 9Yes 9No
 - (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? 9Yes 9No
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? 9Yes 9No

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility: **«Financial»**

Has there been any change in that information/proof of financial responsibility?

9Yes - Explain here and attach appropriate documentation for your choice as listed in the table below:

9No - Attach appropriate documentation for your choice of financial responsibility as listed in the table below, to verify that it remains in place.

To be issued or maintain a certificate of registration, a provider must comply with one of the following:	
Reference: NRS 690C.170(1)	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year At Renewal: Submit a current copy of your insurance policy.
Reference: NRS 690C.170(2)	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Reference: NRS 690C.170(3)	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

6. Please provide the following information regarding the service contracts you sell.
- A. List the service contract form names and form numbers that you sell in Nevada. Attach additional sheets if necessary.

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

If you do not sell your contracts at specific locations, how do you contact the potential customer?

- C. Number of service contracts sold to Nevada residents:

Calendar year: 2008 _____

Calendar year: 2009 _____

- D. Service contract revenue – Gross revenue received from Nevada residents:

Calendar year: 2008 \$ _____

Calendar year: 2009 \$ _____

- E. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2008 \$ _____

Calendar year: 2009 \$ _____

- F. Number of customer complaints by Nevada residents:

Calendar year: 2008 _____

Calendar year: 2009 _____

How are complaints handled? _____

Part III: Verification

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____ 20____

Telephone No: _____

Name of Corporation

By

Signature of Officer in full

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Print Name and Title

CHW073184

AA000435



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name: «Company»
 Current Certificate Number: NV «ORGID»
 Initial Certificate Issued: «Approved»

Mailing Address:
 «Attn»
 «Address»
 «City», «State» «zip»

Contact: «Contact»
 Phone: «Phone» Ext. «ext»
 Fax: «Fax»
 E-mail: «email»

The following questions must be answered before your renewal application can be processed.

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application?

Yes ____ No ____

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

2. Have you made any changes in the administrator or designated a new administrator since your **last** application?

Yes ____ No ____

Current Administrator is listed as:
 «Administrator»

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

CHW073185

AA000436

3. Since the **last** application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ____ No ____
- (b) Been insolvent or adjudged a bankrupt? Yes ____ No ____
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ____ No ____
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ____ No ____
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes ____ No ____

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
«Financial»

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below:

No ____ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers who obtained a Certificate of Registration before October 1, 2011 must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

6. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

If you do not sell your contracts at specific locations, how do you contact the potential customer?

C. Number of service contracts sold to Nevada residents:

Calendar year: 2010 _____

Calendar year: 2011 _____

D. Service contract revenue – Gross revenue received from Nevada residents:

Calendar year: 2010 \$ _____

Calendar year: 2011 \$ _____

E. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2010 \$ _____

Calendar year: 2011 \$ _____

F. Number of customer complaints by Nevada residents:

Calendar year: 2010 _____

Calendar year: 2011 _____

How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____, 20____

Telephone No: _____

Name of Corporation

By

Signature of Officer in full

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Print Name and Title

CHW073187

AA000438

BRIAN SANDOVAL
Governor

STATE OF NEVADA

TERRY JOHNSON
Director

SCOTT J. KOPPER
Commissioner



DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INSURANCE
1818 Barr College Pkwy., Suite 103
Carson City, Nevada 89706
(775) 687-0700 • Fax (775) 687-0787
Website: doi.nv.gov
E-mail: insinfo@doi.state.nv.us

November 9, 2011

Attention: Victor Mandalawi, President
Home Warranty Administrator of Nevada, Inc.
90 WASHINGTON VALLEY RD
BEDMINSTER NJ 07921-2118

Re: Home Warranty Administrator of Nevada, Inc.
Nevada Company ID No. 113194
Service Contract Provider Application – Renewal – Filing # 27573 - Approved

Dear Mr. Mandalawi:

The "Service Contract Provider Application – Renewal" has been approved for Home Warranty Administrator of Nevada, Inc. through November 18, 2012.

Your Nevada Company Identification Number 113194 remains the same.

When submitting new service contracts for approval, we encourage using the electronic form filing process through SERFF (System for Electronic Rate and Form Filing). See the Service Contracts page of our Web site doi.nv.gov for more information on filing procedures. This page is available under the "Property & Casualty" portion of the "Insurers" section of the site.

Sincerely,

A handwritten signature in cursive script, appearing to read "Dolores Bennett".

Dolores Bennett, ARC, ARM, AIS, AINS
Insurance Examiner
Phone: (775) 687-0763
E-mail: dbennett@doi.state.nv.us

CHW073335

AA000439

27573



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0707 Web: dobi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to the contact information below.

Provider Name: Home Warranty Administrator of Nevada, Inc.
Current Certificate Number: NV 113194
Initial Certificate Issued: 11/18/2010

Mailing Address:
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Contact: Victor Mandalawi, President

Phone: (866) 681-3656 Ext.
Fax: (732) 579-5861
E-mail: vmandalawi@homewarrantyadministrators.com

11/3/2011 KR Sect: 4 10 - 38130C-3700 FY: 2012
Service Contract - Application/Renewal Total: \$1,000.00
Chk #: 1816 - HOME WARRANTY ADMINISTRATOR OF
Org ID: --HOME WARRANTY ADMINISTRATOR OF

The following questions must be answered before your renewal application can be processed.

- Have there been any changes in the executive officers or in the officer responsible for service contract business since your last application?

You ☐ Yes ☒ No

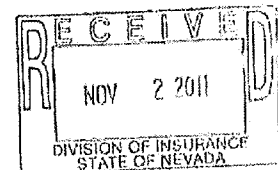
If yes, please attach a list that includes the following information:

- Name
- Title
- Date of Birth
- Social Security Number
- Address of Residence

- Have you made any changes in the administrator or designated a new administrator since your last application?

You ☐ Yes ☒ No Current Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.



CHW073336

AA000440

Page 2 of 3

3. Since the last application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ___ No X
- (b) Been insolvent or adjudged a bankrupt? Yes ___ No X
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ___ No X
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ___ No X
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes ___ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the last application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
- Option 2:**
\$25,000 cash deposit with Division (Received 9/14/10) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ___ Explain here and attach appropriate documentation for your choice as listed in the table below:

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

To be issued or maintain a certificate of registration, a provider must comply with one of the following:	
Option 1 Reference: NRS 690C.170(1)	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2 Reference: NRS 690C.170(2)	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 602B.03D, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Option 3 Reference: NRS 690C.170(3)	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000.000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

CHW073337

AA000441

Page 3 of 3

6. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

HWA-NV-0711

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

N/A

If you do not sell your contracts at specific locations, how do you contact the potential customer?

Internet & Telephone

C. Number of service contracts sold to Nevada residents:

Calendar year: 2009 0
Calendar year: 2010 0

D. Service contract revenue -- Gross revenue received from Nevada residents:

Calendar year: 2009 \$ 0.00
Calendar year: 2010 \$ 0.00

E. Claims paid -- Claims paid on behalf of Nevada residents:

Calendar year: 2009 \$ 0.00
Calendar year: 2010 \$ 0.00

F. Number of customer complaints by Nevada residents:

Calendar year: 2009 0
Calendar year: 2010 0

How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated October 31, 2011

Telephone No: 866-681-3656

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business.

Home Warranty Administrator of Nevada, Inc.
Name of Corporation

By

[Signature]
Signature of Officer in full

Victor Mandalawi, President
Print Name and Title

CHW073338

AA000442

BRIAN SANDOVAL
Governor

STATE OF NEVADA

TERRY JOHNSON
Director

SCOTT J. KIPPER
Commissioner



COPY

DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INSURANCE
1818 East College Pkwy., Suite 103
Carson City, Nevada 89706
(775) 687-0700 • Fax (775) 687-0787
Website: doi.nv.gov
E-mail: insinfo@doi.state.nv.us

October 30, 2012

Attn: Victor Mandalawi, President
Home Warranty Administrator of Nevada, Inc.
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Re: Home Warranty Administrator of Nevada, Inc.
Nevada Company ID No. 113194
Service Contract Provider – 11/18/12 Renewal Application – Approved

Dear Mr. Mandalawi:

The "Service Contract Provider Application – Renewal" has been approved for Home Warranty Administrator of Nevada, Inc. through November 18, 2013.

Your Nevada Company Identification Number 113194 remains the same.

When submitting new service contracts for approval, we encourage using the electronic form filing process through SERFF (System for Electronic Rate and Form Filing). See the Service Contracts page of our Web site doi.nv.gov for more information on filing procedures. This page is available under the "Property & Casualty" portion of the "Insurers" section of the site.

Sincerely,

A handwritten signature in black ink, appearing to read "D. Dennis".

Derick Dennis
Management Analyst III
Phone: (775) 687-0769
E-mail: ddennis@doi.nv.gov

CHW073339

AA000443

Page

PAID

OCT 25 '12

Nevada
Invoice - Original

Printed Date: September 14, 2012
 Invoice Date: September 14, 2012
 Balance Due: \$1,000.00
 Due Date: November 18, 2012
 Invoice ID: 403088
 Payor ID: 113194

VICTOR MANDALAWI
 HOME WARRANTY ADMINISTRATOR OF NEVADA INC
 90 WASHINGTON VALLEY RD
 BEDMINSTER NJ 07921-2118

Item Description

9/14/2012 Service Contract Provider

Payments Received



Amount

\$1,000.00

Original Amount Due

\$1,000.00

Balance Due

To maintain your Certificate of Registration as a service contract provider, you must renew the certificate on or before the anniversary of the Initial Certificate Issued date. Your renewal application is enclosed, which must be completed and returned with the bottom portion of this invoice and the \$1,000.00 renewal fee by the Due Date indicated on this invoice.
 Contact Elena Ahrens, Property and Casualty Section, at eahrens@doi.nv.gov or (775) 687-0764 if you have any questions.

Nevada
Invoice - Original

Invoice Date: September 14, 2012
 Balance Due: \$1,000.00
 Due Date: November 18, 2012
 Invoice ID: 403088
 Payor ID: 113194
 Payor Name: HOME WARRANTY
 ADMINISTRATOR OF
 NEVADA, INC.

Make checks payable to: Nevada Division of Insurance
 Tax ID: 88-6000022
 Send payment to:

Nevada Division of Insurance
 1818 E. College Parkway, Suite 103
 Carson City, NV 89706

Detach and Return with Payment

CHW073340

AA000444



Department of Business and Industry

Nevada Division of Insurance

34171

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

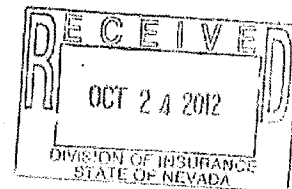
Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name: **Home Warranty Administrator of Nevada, Inc.**
Current Certificate Number: **NV 113194**
Initial Certificate Issued: **11/18/2010**

Mailing Address:
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Contact: **Victor Mandalawi, President**
Phone: **(866) 681-3656 Ext.**
Fax: **(732) 579-5961**
E-mail: **vmandalawi@homewarrantyadministrators.com**



The following questions must be answered before your renewal application can be processed.

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your last application?

Yes _____ No X

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

2. Have you made any changes in the administrator or designated a new administrator since your last application?

Yes _____ No X

Current Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

CHW073341

AA000445

Page 2 of 3

3. Since the last application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ___ No X
- (b) Been insolvent or adjudged a bankrupt? Yes ___ No X
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ___ No X
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ___ No X
4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes ___ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the last application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
Option 2: \$25,000 cash deposit with Division (Receipted 9/14/10) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ___ Explain here and attach appropriate documentation for your choice as listed in the table below:

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers who obtained a Certificate of Registration before October 1, 2011 must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

CHW073342

AA000446

Page 3 of 3

6. Please provide the following information regarding the service contracts you sell.

- A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

HWA-NV-0711

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

N/A

If you do not sell your contracts at specific locations, how do you contact the potential customer?

Internet & Telephone

- C. Number of service contracts sold to Nevada residents:

Calendar year: 2010 0Calendar year: 2011 1213

- D. Service contract revenue – Gross revenue received from Nevada residents:

Calendar year: 2010 \$ 0. 00Calendar year: 2011 \$ 482, 944. 48

- E. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2010 \$ 0. 00Calendar year: 2011 \$ 105, 978. 39

- F. Number of customer complaints by Nevada residents:

Calendar year: 2010 0Calendar year: 2011 2

How are complaints handled? When a complaint comes in we contact the customer and attempt to reach a resolution that is agreed upon by all parties.

If unable to reach agreement, coverage is applied as per the contract.

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated 10/19, 2012Telephone No: 866-681-3656

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Home Warranty Administrator of Nevada, Inc.

Name of Corporation

By

Signature of Officer in full

Victor Mandalawi, President

Print Name and Title

CHW073343

AA000447

Check No: 1818

Date: 10/19/2012

Amount: \$1000.00

Pay to: Nevada Division of Insurance

Check No: 1818

Date: 10/19/2012

Amount: \$1000.00

Pay to: Nevada Division of Insurance

CHW073344

AA000448

BRIAN SANDOVAL
Governor

STATE OF NEVADA

BRUCE H. BRESLOW
Director

SCOTT J. KIPPER
Commissioner



DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INSURANCE
1818 East College Pkwy., Suite 103
Carson City, Nevada 89706
(775) 687-0700 • Fax (775) 687-0787
Website: doi.nv.gov
E-mail: insinfo@doi.nv.gov

COPY

November 25, 2013

Attn: Victor Mandalawi, President
Home Warranty Administrator of Nevada, Inc.
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Re: Home Warranty Administrator of Nevada, Inc.
Nevada Company ID No. 113194
Service Contract Provider – 11/18/13 Renewal Application – Approved

Dear Mr. Mandalawi:

The "Service Contract Provider Application – Renewal" has been approved for Home Warranty Administrator of Nevada, Inc. through November 18, 2014.

Your Nevada Company Identification Number 113194 remains the same.

When submitting new service contracts for approval, we encourage using the electronic form filing process through SERFF (System for Electronic Rate and Form Filing). See the Service Contracts page of our Web site doi.nv.gov for more information on filing procedures. This page is available under the "Property & Casualty" portion of the "Insurers" section of the site.

Sincerely,

A handwritten signature in black ink, appearing to read "Derick Dennis", written over a circular stamp.

Derick Dennis
Management Analyst III
Phone: (775) 687-0769
E-mail: ddennis@doi.nv.gov

CHW073345

AA000449

Nevada
Invoice - Original

Page 1

COPY

VICTOR MANDALAVI
HOME WARRANTY ADMINISTRATOR OF NEVADA INC
90 WASHINGTON VALLEY RD
BEDWINSTER NV 8921-2113

Printed Date: September 13, 2013
Invoice Date: September 13, 2013
Balance Due: \$1,000.00
Due Date: November 18, 2013
Invoice ID: 455621
Payer ID: 113194

Item Description
9/13/2013 Service Contract Provider

Amount	Original Amount Due
\$1,000.00	\$1,000.00

Payments Received

Balance Due

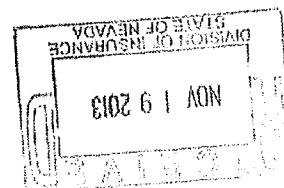
To maintain your Certificate of Registration as a service contract provider, you must renew the certificate on or before the anniversary of the Initial Certificate Issued date. Your renewal application is enclosed, which must be completed and returned with the bottom portion of this invoice and the \$1,000.00 renewal fee by the Due Date indicated on this invoice.
Contact Derrick Dennis, Property and Casualty Section, at ddennis@doins.gov or (775) 687-4769 if you have any questions.

Nevada
Invoice - Original

Make checks payable to: Nevada Division of Insurance
Tax ID: 88-600922
Send payment to:
Nevada Division of Insurance
1818 E. College Parkway, Suite 103
Carson City, NV 89706

Invoice Date: September 13, 2013
Balance Due: \$1,000.00
Due Date: November 18, 2013
Invoice ID: 455621
Payer ID: 113194
Payer Name: HOME WARRANTY
ADMINISTRATOR OF
NEVADA, INC.

Detach and Retain with Payment



PAID
NOV 20 13
1000.00

CHW073346

AA000450



Department of Business and Industry

Nevada Division of Insurance

1615 E. College Parkway, Ste 104, Carson City, Nevada 89706 Phone (775) 687-0700 Fax (775) 687-0707 Web: dbi.nv.gov

41180

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name: Home Warranty Administrator of Nevada, Inc.
Current Certificate Number: NV 113194
Initial Certificate Issued: 11/18/2010

Mailing Address:
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Contact: Victor Mandelawi, President
Phone: (860) 881-3656 Ext.
Fax: (732) 579-5961
Email: vmandelawi@homewarrantyadministrators.com

The following questions must be answered before your renewal application can be processed.

1. Have there been any changes in the executive officers or in the officers responsible for service contract business since your last application?

Yes ☐ No ☒

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

2. Have you made any changes in the administrator or designated a new administrator since your last application?

Yes ☐ No ☒ Current Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

Page 2 of 3.

3. Since the last application, has applicant or any of the officers listed in question 1 ever

(a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes No X(b) Been insolvent or adjudged a bankrupt? Yes No X(c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes No X(d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes No X4. Other than traffic infractions, is there now pending against any of the applicant's officers or directors any criminal actions? Yes No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

5. In the last application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
Option 2: \$25,000 cash deposit with Division (Receipted 9/14/10) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes Explain here and attach appropriate documentation for your choice as listed in the table below.No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers who obtained a Certificate of Registration before October 1, 2011 must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year At Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 692B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: For all securities other than cash, submit documentation verifying that the security continues in force.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

Page 5 of 3

5. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☒
Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

7. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.
HWA-NV-0771

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.
N/A

If you do not sell your contracts at specific locations, how do you contact the potential customer?
Internet & Telephone

C. Number of service contracts sold to Nevada residents:

Calendar year 2011 1205
Calendar year 2012 1874

D. Service contract revenue - Gross revenue received from Nevada residents:

Calendar year 2011 \$ 482,344 48
Calendar year 2012 \$ 739,354 25

E. Claims paid - Claims paid on behalf of Nevada residents:

Calendar year 2011 \$ 305,978 39
Calendar year 2012 \$ 345,352 64

F. Number of customer complaints by Nevada residents:


Calendar year 2011 6
Calendar year 2012 9

How are complaints handled?
Consumers are contacted and each and every problem is resolved

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (s) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated November 18, 2013.
Home Warranty Administrator of Nevada, Inc.

Telephone No. 886-681-3556

By  Signature of Officer in full

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Victor Mandalawi, Owner
Print Name and Title

1819

Home Warranty Administrator of Nevada, Inc.

Nevada Division of Insurance

11/18/2013

1,000.00

GSCB

1,000.00

1819

Home Warranty Administrator of Nevada, Inc.

Nevada Division of Insurance

11/18/2013

1,000.00

GSCB

1,000.00

BRIAN SANDOVAL
Governor

STATE OF NEVADA

BRUCE H. BRESLOW
Director

SCOTT J. KIPPER
Commissioner



COPY

DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INSURANCE
1818 East College Pkwy., Suite 103
Carson City, Nevada 89706
(775) 687-0700 • Fax (775) 687-0787
Website: doi.nv.gov
E-mail: insinfo@doi.nv.gov

December 2, 2014

Attn: Victor Mandalawi, President
Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Re: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
Nevada Company ID No. 113194
Service Contract Provider – 11/18/14 Renewal Application – Approved

Dear Mr. Mandalawi:

The "Service Contract Provider Application – Renewal" has been approved for Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty through November 18, 2015.

Your Nevada Company Identification Number 113194 remains the same.

When submitting new service contracts for approval, we encourage using the electronic form filing process through SERFF (System for Electronic Rate and Form Filing). See the Service Contracts page of our Web site doi.nv.gov for more information on filing procedures. This page is available under the "Property & Casualty" portion of the "Insurers" section of the site.

Sincerely,

A handwritten signature in black ink, appearing to read "Derick Dennis".

Derick Dennis
Management Analyst III
Phone: (775) 687-0769
E-mail: ddennis@doi.nv.gov

CHW073351

AA000455

48304



Department of Business and Industry

Nevada Division of Insurance

1810 E. College Parkway, Ste. 103, Carson City, NV 89708 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: dol.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below:

Provider Name: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
Current Certificate Number: 113194
Initial Certificate Issued: 11/16/2010

Mailing Address: 90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Contact: Victor Mandalawi, President
Phone: (866) 681-3656
Fax: (732) 579-5961
E-mail: vmandalawi@homewarrantyadministrators.com

The following questions must be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As). Provide supporting documentation.

NA

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your last application?

Yes ☐ No ☒

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have you made any changes in the administrator or designated a new administrator since your last application?

Yes ☐ No ☒ Current Administrator is listed as:

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

CHW073352

AA000456

Page 2 of 4

4. Since the last application, has applicant or any of the officers listed in question 1 ever:
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ___ No X
 - (b) Been insolvent or adjudged a bankrupt? Yes ___ No X
 - (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ___ No X
 - (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ___ No X
5. Other than traffic infractions, are there any pending criminal actions against any of the applicant's officers or directors? Yes ___ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

- ii. In the last application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
Option 2: \$25,000 cash deposit with Division (Receipted 2/14/10), \$25,000 cash deposit with Division (Receipted 5/14/14) (\$50,000 total) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ___ Explain here and attach appropriate documentation for your choice as listed in the table

below:

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Financial Security Options: Service Contract Providers must comply with one of the following financial security options to maintain a Certificate of Registration:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account that contains at all times an amount of money equal to at least 40% of the unearned gross consideration received from Nevada residents for unexpired service contracts and deposit with the Commissioner \$25,000 or 10% of the unearned gross consideration received from Nevada residents for unexpired service contracts, whichever is greater. The security deposited with the Commissioner may be a surety bond, or other securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: Submit updated security deposit with the Commissioner to reflect 10% of unearned gross consideration as of December 31, 2013, or \$25,000, whichever is greater, with the renewal, or verify that the current security continues in force in the correct amount.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

CHW073353

AA000457

Page 3 of 4

7. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☒
 Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

8. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

HWA-NV-0711

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

NA

If you do not sell your contracts at specific locations, how do you contact the potential customer?

Internet & Telephone

C. Number of service contracts sold to Nevada residents:

Calendar year: 2012 1839

Calendar year: 2013 2183

D. Gross Revenue received from Nevada residents:

Calendar year: 2012: \$ 1,039,293

Calendar year 2013: \$ 1,789,614

E. If Using Financial Security Option 2, complete the following:

Unearned gross consideration* on all unexpired service contracts sold to Nevada residents:

As of December 31, 2012: \$ 688,800

As of March 31, 2013: \$ 753,134

As of June 30, 2013: \$ 857,405

As of September 30, 2013: \$ 1,038,608

As of December 31, 2013: \$ 1,094,207

As of March 31, 2014: \$ 1,250,689

As of June 30, 2014: \$ 1,527,066

As of September 30, 2014: \$ 1,625,855

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

F. Claims paid - Claims paid on behalf of Nevada residents:

Calendar year: 2012 \$ 316,352

Calendar year: 2013 \$ 513,787

G. Number of customer complaints by Nevada residents:

Calendar year: 2012

Calendar year: 2013

How are complaints handled?

Page 4 of 4

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated November 12, 20 14

Telephone No: 866-681-3656

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Home Warranty Administrator of Nevada, Inc.

Name of Corporation

By




Signature of Officer in full

Victor Mandalawi, President

Print Name and Title

CHW073355

AA000459

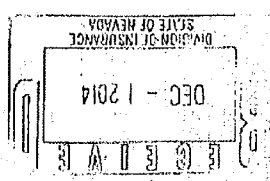
Home Warranty Administrator of Nevada, Inc. 90 Washington Valley Road Bedminster, NJ 07921		Garden State Commur hk	1824
		55-2872 2212 580	11/28/2014
Pay to the Order of	Nevada Division of Insurance	\$52,585.50	
Fifty-Two Thousand Five Hundred Eighty-Five and 50/100*****		DOLLARS	
Nevada Division of Insurance 1818 E College Parkway Suite 103 Carson City, NV 89706		VOID IF NOT PROCESSED WITHIN 15 DAYS 	
SECURITY LOCKS WILL DISAPPEAR WHEN COPIED OR WITH NORMAL BODY HEAT			
⑈000001824⑈ ⑆221278721⑆ 5500001537⑈			

Home Warranty Administrator of Nevada, Inc. 1824
Nevada Division of Insurance 11/26/2014 52,585.50

COPY

GSCB 52,585.50

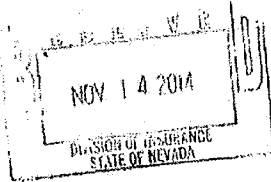
Home Warranty Administrator of Nevada, Inc. 1824
Nevada Division of Insurance 11/26/2014 52,585.50



GSCB 52,585.50

CHW073357

[illegible]



Nevada
Invoice - Original

Page 1

Printed Date: September 15, 2014
 Invoice Date: September 15, 2014
 Balance Due: \$1,000.00
 Due Date: November 18, 2014
 Invoice ID: 508107
 Payor ID: 113194

VICTOR MANDALAWI
 HOME WARRANTY ADMINISTRATOR OF NEVADA INC DBA CHOICE
 HOME WARRANTY
 90 WASHINGTON VALLEY RD
 BEDMINSTER NJ 07921-2118

PAID

NOV 17 '14

Item Description	Amount
9/15/2014 Service Contract Provider	\$1,000.00
Original Amount Due	\$1,000.00
Payments Received	
Balance Due	

To maintain your Certificate of Registration as a service contract provider, you must renew the certificate on or before the anniversary of the Initial Certificate Issued date. Your renewal application is enclosed, which must be completed and returned with the bottom portion of this invoice and the \$1,000.00 renewal fee by the Due Date indicated on this invoice.

Contact Derick Dennis, Property and Casualty Section, at ddennis@dol.nv.gov or (775) 687-0769 if you have any questions.

Nevada
Invoice - Original

Invoice Date: September 15, 2014
 Balance Due: \$1,000.00
 Due Date: November 18, 2014
 Invoice ID: 508107
 Payor ID: 113194
 Payor Name: HOME WARRANTY
 ADMINISTRATOR OF
 NEVADA, INC. DBA
 CHOICE HOME
 WARRANTY

Make checks payable to: Nevada Division of Insurance
 Tax ID: 88-0000022
 Send payment to:

Nevada Division of Insurance
 1818 E. College Parkway, Suite 103
 Carson City, NV 89706

Detach and Return with Payment

CHW073359

AA000463

1823

Home Warranty Administrator of Nevada, Inc.

Nevada Division of Insurance

11/12/2014

1,000.00

GSCB

1,000.00

1823

Home Warranty Administrator of Nevada, Inc.

Nevada Division of Insurance

11/12/2014

1,000.00

GSCB

1,000.00

BRIAN SANDOVAL
Governor

STATE OF NEVADA

BRUCE H. BRESLOW
Director

AMY L. PARKS
Acting Commissioner



COPY

DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INSURANCE
1818 East College Pkwy., Suite 103
Carson City, Nevada 89706
(775) 687-0700 • Fax (775) 687-0787
Website: doi.nv.gov
E-mail: insinfo@doi.nv.gov
December 11, 2015

Attn: Victor Mandalawi, President
Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
90 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Re: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
Nevada Company ID No. 113194
Service Contract Provider – 11/18/15 Renewal Application – Approved

Dear Mr. Mandalawi:

The "Service Contract Provider Application – Renewal" has been approved for Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty through November 18, 2016.

Your Nevada Company Identification Number 113194 remains the same.

When submitting new service contracts for approval, we encourage using the electronic form filing process through SERFF (System for Electronic Rate and Form Filing). See the Service Contracts page of our Web site doi.nv.gov for more information on filing procedures. This page is available under the "Property & Casualty" portion of the "Insurers" section of the site.

Sincerely,

A handwritten signature in cursive script that reads "Mary Strong".

Mary Strong
Management Analyst III
Phone: (775) 687-0763
E-mail: mstrong@doi.nv.gov

CHW073361

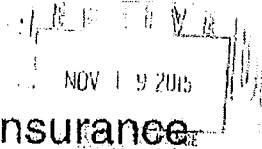
AA000465



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste. 103, Carson City, NV 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: dol.nv.gov



57335

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
Current Certificate Number: 113194
Initial Certificate issued: 11/18/2010

Mailing Address: 80 WASHINGTON VALLEY RD
BEDMINSTER, NJ 07921-2118

Contact: Victor Mandalawi, President
Phone: (866) 881-3658
Fax: (732) 579-5961
E-mail: vmandalawi@homewarrantyadministrators.com

The following questions must be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As). Provide supporting documentation.
✓ NA

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your last application?
Yes ☐ No ☒
✓ If yes, please attach a list and include the following information:
 1. Name
 2. Title
 3. Date of Birth
 4. Social Security Number
 5. Address of Residence

3. Have you made any changes in the administrator or designated a new administrator since your last application?
Yes ☐ No ☒ Current Administrator is listed as:
✓ List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

CHW073362

AA000466

Page 2 of 4

- ✓ 4. Since the last application, has applicant or any of the officers listed in question 1 ever
- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud? Yes ___ No X
- (b) Been insolvent or adjudged a bankrupt? Yes ___ No X
- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ___ No X
- (d) Been fined by any state or governmental agency or authority in any matter regarding service contracts? Yes ___ No X
- ✓ 5. Other than traffic infractions, are there any pending criminal actions against any of the applicant's officers or directors? Yes ___ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

- B. In the last application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:
- ✓ Option 2: \$25,000 cash deposit with Division (Receipted 9/14/10), \$85,000 cash deposit with Division (Receipted 6/14/14), \$52,585.50 check deposit with Division ck#1824 (Receipted 12/14) (\$162,685.50 total) and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ___ Explain here and attach appropriate documentation for your choice as listed in the table below:

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Financial Security Options: Service Contract Providers must comply with one of the following financial security options to maintain a Certificate of Registration:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells or offers for sale. Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.
Option 2	Maintain a reserve account that contains at all times an amount of money equal to at least 40% of the unearned gross consideration received from Nevada residents for unexpired service contracts and deposit with the Commissioner \$25,000 or 10% of the unearned gross consideration received from Nevada residents for unexpired service contracts, whichever is greater. The security deposited with the Commissioner may be a surety bond, or other securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: Submit updated security deposit with the Commissioner to reflect 10% of unearned gross consideration as the end of the most recent quarter, or \$25,000, whichever is greater, with this renewal, or verify that the current security continues in force in the correct amount.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: Submit a copy of the most current 10K or 20F that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.

CHW073363

AA000467

Page 3 of 4

7. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☒
 Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

8. Please provide the following information regarding the service contracts you sell.

- A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filled and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

✓ HWA-NV-0711

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.
 NA

If you do not sell your contracts at specific locations, how do you contact the potential customer?
 Internet & Telephone

- C. Number of service contracts sold to Nevada residents: ✓
 Calendar year: 2013 2193
 Calendar year: 2014 2899 ✓

- D. Gross Revenue received from Nevada residents: ✓
 Calendar year: 2013: \$ 1 789 614 ✓
 Calendar year 2014: \$ 2 267 364 ✓

- E. If Using Financial Security Option 2, complete the following:
 Unearned gross consideration* on all unexpired service contracts sold to Nevada residents:
 As of December 31, 2014: \$

As of March 31, 2014: \$ 1 250 689
 As of June 30, 2014: \$ 1 527 066
 As of September 30, 2014: \$ 1 625 855
 As of December 31, 2014: \$ 1 756 768

As of March 31, 2015: \$ 1 921 552
 As of June 31, 2015: \$ 2 111 480
 As of September 30, 2015: \$ 2 357 658

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

- F. Claims paid – Claims paid on behalf of Nevada residents:
 Calendar year: 2013 \$ 315 352
 Calendar year: 2014 \$ 723 835 ✓

- G. Number of customer complaints by Nevada residents:
 ✓ Calendar year: 2013
 Calendar year: 2014

CHW073364

AA000468

Page 4 of 4

9. How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated November 17, 20 15

Telephone No: 866-681-3656

This renewal application must be verified and signed by one of the officers listed/named on a prior application or listed in Question 1 for service contract business

Home Warranty Administrator of Nevada Inc.
Name of Corporation

By 
Signature of Officer in full

Victor Mandalawi, President
Print Name and Title

CHW073365

AA000469

Home Warranty Administrator
of Nevada, Inc.
90 Washington Valley Road
Bedminster, NJ 07921

Chesapeake Bank
08-377
514

1802

12/3/2015

Pay to the Order of: Nevada Division of Insurance

\$73,180.30

Seventy-Three Thousand One Hundred Eighty and 30/100 *****DOLLARS

Nevada Division of Insurance
1818 E College Parkway
Suite 103
Carson City, NV 89708

VOID IF NOT PROCESSED WITHIN 90 DAYS

SECURITY FEATURES INCLUDED. DETAILS ON BACK

⑈000001802⑈ ⑈051403779⑈ 013605612⑈

Home Warranty Administrator of Nevada, Inc.
Nevada Division of Insurance

1802

12/3/2015

73,180.30

Chesapeake Main

73,180.30

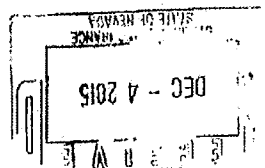
Home Warranty Administrator of Nevada, Inc.
Nevada Division of Insurance

1802

12/3/2015

73,180.30

Chesapeake Main



73,180.30

CHW073366

AA000470

1801

Home Warranty Administrator of Nevada, Inc.

Nevada Division of Insurance

11/13/2015

1,000.00

Chesapeake Main

1,000.00

1801

Home Warranty Administrator of Nevada, Inc.

Nevada Division of Insurance

11/18/2015

1,000.00

Chesapeake Main

1,000.00

PROCEDURE FOR REVIEWING RENEWAL APPLICATIONS

Company Home Warranty Org. ID # 113194 Filing # 57335

Verify the following

- ✓ 1. \$1,000 Renewal fee has been received.
- ✓ 2. \$1,300 Fund for Insurance Administration and Enforcement fees current
- ✓ 3. Application has been properly completed, e.g., all blanks filled or accounted for with the appropriate supporting documents.
- ✓ 4. The company may or may not have a third party administrator. Third party administrators are not required to be registered for service contracts. Check application for changes in administrator.
- ✓ 5. If company answers "yes" to any of the questions on number 3 or on Question 4 of the application, make sure they provide an explanation.
- ✓ 6. The company must provide documentation of proof of financial responsibility, e.g. a copy of the contractual liability policy, surety bond, etc. if changes have been indicated on the application. If the company provides a Securities and Exchange Commission (SEC) Form 10-K as proof of financial stability, make sure the stockholder's equity is 100 million or greater. If the company has a contractual liability policy, make sure it is with a company that has a Certificate of Authority in Nevada. *See Sircon's emails* *additional Funds*
- ✓ 7. Types of contracts sold.
- ✓ 8. Check the list of service contract forms against the list in the Access database. Note: The DOI list may be incomplete because the forms were not documented prior to January 2002. If it appears the company is using an unauthorized form, request a copy of the contract for your review.
- ✓ 9. Check Consumer Complaints database in Sircon for excess complaints.
- ✓ 10. Verify one of the Officers signed the application.
- 11. Verify Corporation/LLC is still in existence in company's domicile state. *Nevada*
- 12. (Check Secretary of State or applicable web site for that state)

If anything is questionable, contact company and obtain required information or documentation.

If everything is completed properly, go to the next step.

PROCEDURE FOR UPDATING ACCESS DATABASE TO REFLECT INFORMATION FROM RENEWAL APPLICATIONS

1. Click the *Form* tab and open *F Service Contract Entry Form*.

- ✓ 2. *Mailed Renew Reminder*: delete date and any follow-up checkmarks.
- ✓ 3. *Through*: Change year to the following year, e.g., 2012 should be changed to 2013.
- ✓ 4. *Company Status*: On the pull-down menu, hi-light *Renewal Approved*.
- ✓ 5. *Status Date*: Key in date you processed renewal application.
- ✓ 6. *Statistical Information*: Add information from 6.C, 6.D, and 6E of the application in the appropriate Calendar years.
- ✓ 7. *Financial Responsibility*: update note, verify CLIP, 10K, policy is in effect.

Note: If company made corrections to the Contact information on the first page of the renewal application and/or Administrator information and/or financial information on the second page of the application, update the form to reflect the changes. Also, update Sircon database with any contact or address changes.

PREPARE RENEWAL APPLICATION ACKNOWLEDGE LETTER

Open in Microsoft Word:

\\Doi-ads1.doi-ad.state.nv.us\PropertyCasualty\Personnel\mstrong\Service Contracts\APPROVED-RENEWAL LETTERS

Copy an existing letter in this folder and update with current company information. Save new letter in this folder. Print letter on letterhead and print envelope. Sign and mail letter.

Update P&C Filings Database

Sircon: ✓ *Notes*: Subject – Renewal Filing, Note – Approved renewal application for Date, Initials.

✓ *Approval/Disapproval*

✓ *Financial Status*

— *Address change, if needed.*

Log out the renewal application Filing Number. File application with documentation and acknowledgement letter in company file.

Note: Do not file with form filings. Information is considered confidential.

Bennett (02/07/11)

Bennett (7/15/11) Added corporation verification bullet point

Bennett (10/31/11) Updated "Application Status" to "Company Status" and "Date Renewed" to "Status Date"

Strong (11/24/15)

AA000474

PAID
NOV 10 15
PAID
NOV 20 15

**Nevada
Invoice**

Page 1

Printed Date: November 20, 2015

Invoice Date: September 09, 2015
Balance Due: \$0.00
Due Date: November 18, 2015
Invoice ID: 560074

HOME WARRANTY ADMINISTRATOR OF NEVADA INC DBA CHOICE
90 WASHINGTON VALLEY RD
BEDMINSTER NJ 07921-2118

Item Description	Amount
Service Contract Provider	\$1,000.00
Original Amount Due	\$1,000.00
Payments Received	
11/20/2015 Check	\$1,000.00
Balance Due	\$0.00

**Nevada
Invoice**

Printed Date: November 20, 2015

Invoice Date: September 09, 2015
Balance Due: \$0.00
Due Date: November 18, 2015
Invoice ID: 560074

Make checks payable to: Nevada Division of Insurance
Tax ID: 88-6000022
Send payment to:

Nevada Division of Insurance
1818 E. College Parkway, Suite 103
Carson City, NV 89706

Detach and Return with Payment

CHW073371

AA000475

64868



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: dol.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name: Home Warranty Administrator of Nevada, Inc. dba Choice Home Warranty
Current Certificate Number: NV 113194
Initial Certificate Issued: 11/18/2010

Mailing Address:
90 WASHINGTON VALLEY RD
BEDMINSTER NJ 07921-2118

Contact: Victor Mandalawi, President
Phone: (866) 681-3656 Ext.
Fax: (732) 579-5961
E-mail: vmandalawi@homewarrantyadministrators.com

The following questions must be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As) in Nevada. Provide supporting documentation filed with the County Clerk of the county in which the company is doing business.
NA

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your last application?

Yes ☐ No ☒

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have there been any changes in the percentage of ownership?

Yes ☐ No ☒

If yes, please attached a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence
6. Percentage of Company Owned

CHW073372

AA000476

Page 2 of 4
4.

Have there been any changes in the administrator or designated a new administrator since your last application?

Yes ____ No X

Current Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

5. Since the last application, has the applicant or any of the officers listed in question 1 ever:

(a) Been convicted of a felony or any misdemeanor? Yes ____ No X

(b) Been insolvent or adjudged a bankrupt? Yes ____ No X

(c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ____ No X

(d) Been fined or had any administrative actions taken by any state or governmental agency or authority in any matter regarding service contracts? Yes ____ No X

(e) Other than traffic infractions, are there any past/pending criminal or civil actions against any of the applicant's officers or directors? Yes ____ No X

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

6. In the last application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:

Option 2: \$25,000 cash deposit (Receipted 9/14/10), \$85,000 cash deposit (Receipted 5/14/14), \$52,585.50 check deposit ck#1824 (Receipted 12/14), \$73,180.30 check #1802 (Receipted 12/9/15) (235,765.80 total), and reserve account affidavit.

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below.

No X Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Page 3 of 4

Service Contract Providers must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells, or offers for sale. <i>Each Year at Renewal: Submit documentation from the insurer verifying that the policy is still current and in full force.</i>
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. <i>Each Year At Renewal: Submit documentation verifying that the security of 40% of unearned gross consideration on all unexpired service contracts sold to Nevada residents. The reserve account shall be maintained exclusively for service contracts in this state. Monthly statements of the reserve account (3 monthly statements) must be submitted to the Division at the end of each calendar quarter.</i>
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. <i>Each Year At Renewal: Submit a copy of the most current 10K or 20F form that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.</i>

8. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☒

Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

9. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

HWA-NV-0711 ✓

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

-Internet & Telephone

If you do not sell your contracts at specific locations, how do you contact the potential customer?

C. Number of service contracts sold to Nevada residents:

Calendar year: 2014 2899

Calendar year: 2015 5682

CHW073374

AA000478

Page 4 of 4

D. If using Financial Security Option 2, complete the following: Unearned gross considerations* on all unexpired service contracts sold to Nevada residents:				
Quarter	Gross Revenue Received from Nevada Residents:	Unearned Gross Considerations	Security Deposit (10% of Unearned Gross Considerations)	Reserve Account (40% of Unearned Gross Considerations)
Ending: 12/31/13				
Ending: 03/31/14	2,109,123	1,250,689	125,068	500,275
Ending: 06/30/14	2,391,152	1,527,066	152,706	610,826
Ending: 09/30/14	2,684,773	1,625,855	162,585	650,342
Ending: 12/31/14	2,983,675	1,756,768	175,676	702,707
Ending: 03/31/16	6,451,445	2,468,163	246,816	987,265
Ending: 06/30/16	7,319,912	2,778,200	277,820	1,111,280
Ending: 09/30/16	8,165,594	3,064,652	306,465	1,225,860

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

E. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2014 \$ 723 , 835 , _____

Calendar year: 2015 \$ 1 , 154 , 944 , _____

F. Number of customer complaints by Nevada residents:

Calendar year: 2014 _____

Calendar year: 2015 _____

10. How are complaints handled? _____


The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated November 7th , 20 16

Home Warranty Administrator of Nevada Inc
Name of Service Contract Provider

Telephone No: 866-681-3656

By


Signature of Officer in full

Signature of Officer in full

Victor Mandalawi, President

Print Name and Title

Print Name and Title

This renewal application must be verified and signed by two of the officers listed/named on file with the Division of Insurance in Question 2 for service contract business.

Revised 7/5/16

CHW073375

AA000479

SERFF
25290
Gunnady

You are here: [Filing Search \(filingSearch.xhtml\)](#)
> [Filing Search Results \(filingSearchResults.xhtml\)](#) > Filing Summary

[New Search](#)[Refine Search](#)[Return to Search Results](#)[Health Plan Binder Search](#)

Filing Summary

Filing Information

Product Name:

home service agreement

Type Of Insurance:

33.0 Other Lines of Business

Sub Type Of Insurance:

33.0004 Service Contracts

Filing Type:

Form

SERFF Tracking Number:

BLNK-127328348

Submission Date:

7/19/11

Filing Status:

Closed - Approved

12,000
390
12,390

Filing Outcome

SERFF Status:

Closed

Disposition Date:

08/26/2011

Approved

YOUR HOME SERVICE AGREEMENT



CHOICE HOME WARRANTY

America's Choice in Home Warranty Protection

Obligor: Home Warranty Administrator of Nevada, Inc.

Dear Test Account,

Welcome to Choice Home Warranty! You made a wise decision when you chose to protect your home with a home warranty. We appreciate your business and look forward to providing you with quality service for all your home protection needs.

To obtain the most value from your new home warranty, please take a moment to read and understand your coverage. Your coverage is dependant on the plan you have selected.

Should you have a problem with any of your covered systems or appliances, please call us toll-free at (888)-531-5403. We are available 24 hours a day, 7 days a week, 365 days a year, or simply log on to our website located at www.ChoiceHomeWarranty.com and file your claim online.

THIS CONTRACT EXPLAINS THE COVERAGE, LIMITATIONS, & EXCLUSIONS. PLEASE REVIEW YOUR CONTRACT.

Contract Number: 123456789
Contract Term: 01/01/2011 – 01/01/2012
Covered Property:
 123 Main Street
 City, State 12345
Property Type: Single Family
Rate: \$430.00
Service Call Fee: \$60.00

Coverage Plan: Gold Plan
Includes: Air Conditioning System/Heating System,
 Electrical System/Plumbing System/Plumbing
 Stoppage/Water Heater/Whirlpool Bathtub/Refrigerator
 Oven/Range/Stove/Cooktop/Dishwasher/Garbage
 Disposal/Built-In-Microwave/Clothes Washer/Clothes
 Dryer/Ductwork/Garage Door Opener/Ceiling &
 Exhaust Fans ✓
Optional Coverage: None

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YOUR HOME SERVICE AGREEMENT

Throughout this Agreement the words "We", "Us" and "Our" refer to Home Warranty Administrator of Nevada, Inc. (HWA), 90 Washington Valley Road, Bedminster, NJ 07921, the Obligor of this Agreement and it is backed by the full faith and credit of HWA. This Agreement is administered by Choice Home Warranty (Administrator), 510 Thornall Street, Edison, NJ 08837.

A. COVERAGE

During the coverage period, Our sole responsibility will be to arrange for a qualified service contractor ("Service Provider") to repair or replace, at Our expense (up to the limits set forth below), the systems and components mentioned as "Included" in accordance with the terms and conditions of this contract so long as such systems and components:

1. Are located inside the confines of the main foundation of the home or attached or detached garage (with the exception of the exterior pool/spa, well pump, septic tank pumping and air conditioner); and
2. Become inoperative due to normal wear and tear; and
3. Are in place and in proper working order on the effective date of this home warranty contract. This contract does not cover any known or unknown pre-existing conditions. It is understood that WE ARE NOT A SERVICE PROVIDER and are not ourselves undertaking to repair or replace any such systems or components. This contract covers single-family homes (including manufactured homes), new construction homes, condominiums, townhomes, and mobile homes under 5,000 square feet, unless an alternative dwelling type (i.e. above 5,000 square foot or multi-unit home) is applied, and appropriate fee is paid. Coverage is for occupied, owned or rented residential property, not commercial property or residences used as businesses, including, but not limited to, day care centers, fraternity/sorority houses, and nursing/care homes. This contract describes the basic coverage and options available. Coverage is subject to limitations and conditions specified in this contract. Please read your contract carefully. NOTE: This is not a contract of insurance, residential service, warranty, extended warranty, or implied warranty.

B. COVERAGE PERIOD

Coverage starts 30 days after acceptance of application by Us and receipt of applicable contract fees and continues for 365 days from that date. Your coverage may begin before 30 days if We receive proof of prior coverage, showing no lapse of coverage, through another carrier within 15 days of the order date.

C. SERVICE CALLS - TO REQUEST SERVICE: 1-866-681-3656

1. You or your agent (including tenant) must notify The Administrator for work to be performed under this contract as soon as the problem is discovered. The Administrator will accept service calls 24 hours a day, 7 days a week, 365 days a year at 1-866-681-3656. Notice of any malfunction must be given to the Administrator prior to expiration of this contract.
2. Upon request for service, the Administrator will contact an authorized Service Provider within two (2) days during normal business hours and four (4) days on weekends and holidays. The authorized Service Provider will contact You to schedule a mutually convenient appointment during normal business hours.
3. We define an emergency as a breakdown of a covered system which renders the dwelling unfit to live in because of defects that endanger the health and safety of the occupants. Upon request for services that fall within the emergency guidelines the Administrator will commence repairs within 24 hours. If repairs cannot be completed within three calendar days, the Administrator will provide you with a status report. If you should request the Administrator to perform non-emergency service outside of normal business hours, you will be responsible for payment of additional fees and/or overtime charges.
4. The Administrator has the sole and absolute right to select the Service Provider to perform the service; and We will not reimburse for services performed without prior approval.
5. You will pay a trade service call fee ("Service Fee") per claim (amount shown on page one) or the actual cost, whichever is less. The Service Fee is for each visit by Our approved Service Provider, except as noted Section C(6), and is payable to the Us approved Service Provider at the time of each visit. The service fee applies to each call dispatched and scheduled, including but not limited to those calls wherein coverage is included, excluded, or denied. The service fee also applies in the event You fail to be present at a scheduled time, or in the event You cancel a service call at the time a service contractor is en route to your home or at your home.
6. If service work performed under this contract should fail, then We will make the necessary repairs without an additional trade service call fee for a period of 90 days on parts and 30 days on labor.

D. COVERAGE (COVERAGE DEPENDANT ON PLAN)

The Coverage is for no more than one unit, system, or appliance, unless additional fees are paid. If no additional fees are paid, covered unit, system, or appliance is at Our sole discretion; certain limitations of liability apply to Covered systems and appliances.

1. CLOTHES DRYER

INCLUDED: All components and parts, except:

EXCLUDED: Noise - Venting - Lint screens - Knobs and dials - Doors - Door seals - Hinges - Glass - Leveling and balancing - Damage to clothing.

2. CLOTHES WASHER

INCLUDED: All components and parts, except:

EXCLUDED: Noise - Plastic mini-tubs - Soap dispensers - Filter screens - Knobs and dials - Door seals - Hinges - Glass - Leveling and balancing - Damage to clothing.

3. KITCHEN REFRIGERATOR

NOTE: Must be located in the kitchen.

INCLUDED: All components and parts, including integral freezer unit, except:

EXCLUDED: Racks - Shelves - Lighting and handles - Freon - Ice makers, ice crushers, beverage dispensers and their respective equipment - Water lines and valve to ice maker - Line restrictions - Leaks of any kind - Interior thermal shells - Freezers which are not an integral part of the refrigerator - Wine coolers or mini refrigerators - Food spoilage - Doors - Door seals and gaskets - Hinges - Glass - Audio/Visual equipment and internal connection components.

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4. AIR CONDITIONING/COOLER

NOTE: Not exceeding 5 (five) ton capacity and designed for residential use.

INCLUDED: Ducted electric central air conditioning ducted electric wall air conditioning. All components and parts, for units below 13 SEER and when We are unable to facilitate repair/replacement of failed covered equipment at the current SEER rating, repair/replacement will be performed with 13 SEER equipment and/or 7.7 HSPF or higher compliant, except:

EXCLUDED: Gas air conditioning systems - Condenser casings - Registers and Grills - Filters - Electronic air cleaners - Window units - Non-ducted wall units - Water towers - Humidifiers - Improperly sized units - Chillers - All exterior condensing, cooling and pump pads - Roof mounts, jacks, stands or supports - Condensate pumps - Commercial grade equipment - Cost for crane rentals - Air conditioning with mismatched condensing unit and evaporative coil per manufacturer specifications - Improper use of metering devices - Thermal expansion valves - Refrigerant conversion - Leak detections - Water leaks - Drain line stoppages - Maintenance - Noise. No more than two systems covered unless purchased separately at time of enrollment. We are not responsible for the costs associated with matching dimensions, brand or color made. We will not pay for any modifications necessitated by the repair of existing equipment or the installation of new equipment.

5. HEATING SYSTEM OR BUILT-IN WALL UNIT

NOTE: Main source of heat to home not to exceed 5 (five) ton capacity and designed for residential use.

INCLUDED: All components and parts necessary for the operation of the heating system. For units below 13 SEER and when We are unable to facilitate repair/replacement of failed covered equipment at the current SEER rating, repair/replacement will be performed with 13 SEER equipment and/or 7.7 HSPF or higher compliant, except:

EXCLUDED: All components and parts relating to geothermal, water source heat pumps including: outside or underground piping, components for geothermal and/or water source heat pumps, redrilling of wells for geothermal and/or water source heat pumps, Access - Radiators or valves - Baseboard casings - pump and wall pump components for geothermal and/or water source heat pumps. Access - Radiators or valves - Baseboard casings - Radiant heating - Dampers - Valves - Fuel storage tanks - Portable units - Solar heating systems - Fireplaces and key valves - Filters - Line dryers and filters - Oil filters, nozzles, or strainers - Registers - Backflow preventers - Evaporator coil pan - Primary or secondary drain pans - Grills - Clocks - Timers - Add-ons for zoned systems - Heat lamps - Humidifiers - Flues and vents - Improperly sized heating systems - Mismatched systems - Chimneys - Pellet stoves - Cable heat (in ceiling) - Wood stoves (even if only source of heating) - Calcium build-up - Maintenance. NOTE: We will pay no more than \$1,500 per covered item per contract term for access, diagnosis and repair or replacement of any glycol, hot water, or steam circulating heating systems.

6. WATER HEATER (Gas and/or Electric)

INCLUDED: All components and parts, including circulating pumps, except:

EXCLUDED: Access - Insulation blankets - Pressure reducing valve - Sediment build-up - Rust and corrosion - Main, Holding or storage tanks - Vents and flues - Thermal expansion tanks - Low boy and/or Squat water heaters - Solar water heaters - Solar components - Fuel, holding or storage tanks - Noise - Energy management systems - Commercial grade equipment and units exceeding 75 gallons - Drain pans and drain lines - Tankless water heaters.

7. ELECTRICAL SYSTEM

INCLUDED: All components and parts, including built-in bathroom exhaust fans, except:

EXCLUDED: Fixtures - Carbon monoxide alarms, smoke detectors, detectors or related systems - Intercoms and door bell systems associated with intercoms - Inadequate wiring capacity - Solar power systems and panels - Solar Components - Energy Management Systems - Direct current (D.C.) wiring or components - Attic exhaust fans - Commercial grade equipment - Auxiliary or sub-panels - Broken and/or severed wires - Re-running of new wiring for broken wires - Wire tracing - Garage door openers - Central vacuum systems - Damages due to power failure or surge - Circuit Overload. We will pay no more than \$500 per contract term for access, diagnosis and repair and/or replacement.

8. PLUMBING SYSTEM/STOPPAGE

INCLUDED: Leaks and breaks of water, drain, gas, waste or vent lines, except if caused by freezing or roots - Toilet tanks, bowls and mechanisms (replaced with builder's grade as necessary), toilet wax ring seals - Valves for shower, tub, and diverter angle stops, rinses and gate valves - Permanently installed interior sump pumps - Built-in bathtub whirlpool motor and pump assemblies - Stoppages/Clogs in drain and sewer lines up to 100 feet from access point. Mainline stoppages are only covered if there is an accessible ground level clean out, except:

EXCLUDED: Stoppages and clogs in drain and sewer lines that cannot be cleared by cable or due to roots, collapsed, broken, or damaged lines outside the confines of the main foundation (even if within 100 feet of access point) - Access to drain or sewer lines from vent or removal of water closets - Cost to locate, access or install ground level clean out - Slab leaks - Polyethylene or Quest piping - Galvanized drain lines - Hose Bibs - Drum traps - Flange - Collapse of or damage to water, drain, gas, waste or vent lines caused by freezing, settlement and/or roots - Faucets, fixtures, cartridges, shower heads & shower arms - Baskets and strainers - Pop-up assemblies - Bathtubs and showers - Cracked porcelain - Glass - Shower enclosures and base pans - Roman tubs - Bath tub drain mechanisms - Sinks - Toilet lids and seats - Cabling or grouting - Whirlpool jets - Whirlpool control panel - Septic tanks - Sewage ejector pumps - Water softeners - Pressure regulators - Inadequate or excessive water pressure - Flow restrictions in fresh water lines caused by rust, corrosion or chemical deposits - Holding or storage tanks - Saunas and/or steam rooms. NOTE: We will provide access to plumbing systems through unobstructed walls, ceilings or floors, only, and will return the access opening to rough finish condition. We will pay no more than \$500 per contract term for access, diagnosis and repair and/or replacement. Our authorized Service Provider will close the access opening and return it to rough finish condition, subject to the \$500 limit indicated. We shall not be responsible for payment of the cost to remove and replace any built-in appliances, cabinets, floor coverings or other obstructions impeding access to walls, ceilings, and/or floors.

9. BUILT-IN MICROWAVE

INCLUDED: All components and parts, except:

EXCLUDED: Doors - Hinges - Handles - Doors - Door glass - Lights - Interior linings - Trays - Clocks - Shelves - Portable or counter top units - Arcing - Meat probe assemblies - Rotisseries.

10. OVEN/RANGE/STOVE/COOKTOP (Gas or Electric; Built-in, Portable or Free Standing).

INCLUDED: All components and parts, except:

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EXCLUDED: Clocks (unless they affect the cooking function of the unit) - Meat probe assemblies - Rotisseries - Racks - Handles - Knobs - Door seals - Doors - Hinges - Lighting and handles - Glass - Sensi-heat burners will only be replaced with standard burners.

11. DISHWASHER

INCLUDED: All components and parts, except:

EXCLUDED: Racks - Baskets - Rollers - Hinges - Handles - Doors - Door gaskets - Glass - Damage caused by broken glass - Cleaning.

12. GARBAGE DISPOSAL

INCLUDED: All components and parts, including entire unit, except:

EXCLUDED: Problems and/or jams caused by bones, glass, or foreign objects other than food.

13. CEILING AND EXHAUST FANS

INCLUDED: Motors - Switches - Controls - Bearings - Blades, except:

EXCLUDED: Fans - Blades - Belts - Shutters - Filters - Lighting. Note: Builder's standard is used when replacement is necessary.

14. DUCTWORK

INCLUDED: Duct from heating unit to point of attachment at registers or grills, except:

EXCLUDED: Registers and grills - Insulation - Asbestos-insulated ductwork - Vents, flues and breaching - Ductwork exposed to outside elements - Improperly sized ductwork - Separation due to settlement and/or lack of support - Damper motors - Diagnostic testing of, or locating leaks to ductwork, including but not limited to, as required by any federal, state or local law, ordinance or regulation, or when required due to the installation or replacement of system equipment. We will provide access to ductwork through unobstructed walls, ceilings or floors, only, and will return the access opening to rough finish condition. With respect to concrete covered, embedded, encased, or otherwise inaccessible ductwork, We will pay no more than \$500 per contract term for access, diagnosis and repair or replacement. Our authorized Service Provider will close the access opening and return to a rough finish condition, subject to the \$500 limit indicated. We shall not be responsible for payment of the cost to remove and replace any built-in appliances, cabinets, floor coverings or other obstructions impeding access to walls, ceilings, and/or floors.

15. GARAGE DOOR OPENER

INCLUDED: All components and parts, except:

EXCLUDED: Garage doors - Hinges - Springs - Sensors - Chains - Travelers - Tracks - Rollers - Remote receiving and/or transmitting devices.

16. GREEN

INCLUDED: If a covered system or appliance (limited to Clothes Washer, Clothes Dryer, Refrigerator, Dishwasher, Heating System, and Water Heater) breaks down per Section A above and subject to all other contract inclusions, exclusions and limitations, and it can not be repaired, We will replace the appliance with an ENERGY STAR qualified product (subject to availability, exclusions and limitations), one with similar and like features as existing appliance, except:

EXCLUDED: All other contract limitations of liability and exclusions apply.

E. OPTIONAL COVERAGE (Requires Additional Payment)

NOTE: You may purchase any Optional Coverage for up to 30 days after commencement of Coverage. However, Coverage shall not commence until receipt of payment by Us and such Coverage shall expire upon expiration of Coverage period in Section B.

1. POOL AND/OR SPA EQUIPMENT

INCLUDED: Both pool and built-in spa equipment (exterior hot tub and whirlpool) are covered if they utilize common equipment. If they do not utilize common equipment, then only one or the other is covered unless an additional fee is paid. Coverage applies to above ground, accessible working components and parts of the heating, pumping and filtration system as follows: Heater - Pump - Motor - Filter - Filter timer - Gaskets - Blower - Timer - Valves, limited to back flush, actuator, check, and 2 and 3-way valves - Relays and switches - Pool sweep motor and pump - Above ground plumbing pipes and wiring, except:

EXCLUDED: Portable or above ground pools/spas - Control panels and electronic boards - Lights - Liners - Maintenance - Structural defects - Solar equipment - Jets - Ornamental fountains, waterfalls and their pumping systems - Pool cover and related equipment - Fill line and fill valve - Built-in or detachable cleaning equipment such as, but not limited to, pool sweeps, pop up heads - Turbo valves, skimmers, chlorinators, and ionizers - Fuel storage tanks - Disposable filtration mediums - Cracked or corroded filter casings - Grids - Cartridges - Heat pump - Salt water systems. We will pay no more than \$500 per contract term for access, diagnosis and repair and/or replacement.

2. SEPTIC TANK PUMPING

INCLUDED: Main line stoppages/clogs (one time only, and must have existing access or clean out). If a stoppage is due to a septic tank back up, then we will pump the septic tank one time during the term of the plan.

Coverage can only become effective if a septic certification was completed within 90 days prior to close of sale. We reserve the right to request a copy of the certification prior to service dispatch.

EXCLUDED: The cost of gaining or finding access to the septic tank and the cost of sewer hook ups - Disposal of waste - Chemical treatments - Tanks - Leach lines - Cess pools - Mechanical pumps/systems. Limited to a total of \$200 maximum.

3. WELL PUMP

INCLUDED: All components and parts of well pump utilized for main dwelling only, except:

EXCLUDED: Holding or storage tanks - Digging - Locating pump - Pump retrieval - Redrilling of wells - Well casings - Pressure tanks - Pressure switches and gauges - Check valve - Relief valve - Drop pipe - Piping or electrical lines leading to or connecting pressure tank and main dwelling including wiring from control box to the pump - Booster pumps - Well pump and well pump components for geothermal and/or water source heat pumps. We will pay no more than \$500 per contract term for access, diagnosis and repair and/or replacement.

4. SUMP PUMP

INCLUDED: Permanently installed sump pump for ground water, within the foundation of the home or attached garage, except:

EXCLUDED: Sewerage ejector pumps - Portable pumps - Backflow preventers - Check valves - Piping modifications for new installs.

5. CENTRAL VACUUM

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INCLUDED: All mechanical system components and parts, except:
EXCLUDED: Ductwork - Hoses - Blockages - Accessories.

6. LIMITED ROOF LEAK (Single Family Homes Only)

INCLUDED: Repair of shake, shingle, and composition roof leaks over the occupied living area.

EXCLUDED: Porches - Patios - Cracked and/or missing material - Foam roofs - Tar and gravel or metal roof - Cementwood shakes - Masonite shingles - Flat or built-up roof - Structural leaks adjacent to or caused by appendages of any kind - Downspouts - Flashing - Gutters - Skylights - Decks - Patio covers - Solar equipment - Roof jacks - Antennae - Satellite components - Chimneys - Partial roof replacement - Preventative maintenance.

NOTE: If roof must be partially or completely replaced to effect repair, this coverage does not apply.

7. STAND ALONE FREEZER

INCLUDED: All parts and components that affect the operation of the unit, except:

EXCLUDED: Ice-makers, crushers, dispensers and related equipment - Internal shell - Racks - Shelves - Glass displays - Lights - Knobs and caps - Dials - Doors - Door seals and gaskets - Door hinges - Door handles - Glass - Condensation pans - Clogged drains and clogged lines - Grates - Food spoilage - Freon - Disposal and recapture of Freon.

8. SECOND REFRIGERATOR

INCLUDED: All components and parts, including integral freezer unit, except:

EXCLUDED: Racks - Shelves - Lighting and handles - Freon - Ice makers, ice crushers, beverage dispensers and their respective equipment - Water lines and valve to ice maker - Line restrictions - Leaks of any kind - Interior thermal shells - Freezers which are not an integral part of the refrigerator - Food spoilage - Doors - Door seals and gaskets - Hinges - Glass - Audio/Visual equipment and internal connection components.

9. SEPTIC SYSTEM

INCLUDED: Sewage ejector pump - Jet pump - Aerobic pump - Septic tank and line from house.

EXCLUDED: Leach lines - Field lines - Lateral lines - Tile fields and leach beds - Insufficient capacity - Clean out - Pumping. **We will pay no more than \$500 per contract term for access, diagnosis and repair and/or replacement.**

F. LIMITATIONS OF LIABILITY

- The following are not included during the contract term: (i) malfunction or improper operation due to rust or corrosion of all systems and appliances, (ii) collapsed ductwork, (iii) known or unknown pre-existing conditions.
- We are not responsible for providing access to or closing access from any covered item which is concrete-encased or otherwise obstructed or inaccessible.
- At times it is necessary to open walls or ceilings to make repairs. The Service Provider obtained by We will close the opening, and return to a rough finish condition. We are not responsible for restoration of any wall coverings, floor coverings, plaster, cabinets, counter tops, tiling, paint, or the like.
- We are not responsible for the repair of any cosmetic defects or performance of routine maintenance.
- Electronic or computerized energy management or lighting and appliance management systems, solar systems and equipment are not included.
- You may be charged an additional fee by the Service Provider to dispose of an old appliance, system or component, including, but not limited to the following items: condensing units, evaporator coils, compressors, capacitors, refrigerators, freezers, water heaters, and any system or appliance which contains dangerous or hazardous materials.
- We are not liable for service involving hazardous or toxic materials including but not limited to mold, lead paint, or asbestos, nor costs or expenses associated with refrigerant recovery, recycling, reclaiming or disposal. We are not liable for any failure to obtain timely service due to conditions beyond Our control, including, but not limited to, labor difficulties or delays in obtaining parts or equipment.
- We are not liable for repair of conditions caused by chemical or sedimentary build up, rust or corrosion, mildew, mold, misuse or abuse.
- We are not liable for failure to clean or maintain as specified by the equipment manufacturer, missing parts, structural changes, fire, freezing, electrical failure or surge, water damage, lightning, mud, earthquake, soil movement, soil settlement, settling of home, storms, accidents, pest damage, acts of God, or failure due to excessive or inadequate water pressure.
- We have the sole right to determine whether a covered system or appliance will be repaired or replaced. We are responsible for installing replacement equipment of similar features, capacity, and efficiency, but not for matching dimensions, brand or color. We are not responsible for upgrades, components, parts, or equipment required due to the incompatibility of the existing equipment with the replacement system or appliance or component or part thereof or with new type of chemical or material utilized to run the replacement equipment including, but not limited to, differences in technology, refrigerant requirements, or efficiency as mandated by federal, state, or local governments. If parts are no longer available, We will offer a cash payment in the amount of the average cost between parts and labor of the covered repair. We reserve the right to locate parts at any time. We are not liable for replacement of entire systems or appliances due to obsolete, discontinued or unavailability of one or more integral parts. However, We will provide reimbursement for the costs of those parts determined by reasonable allowance for the fair value of like parts. We reserve the right to rebuild a part or component, or replace with a rebuilt part or component.
- We are not liable for repairs related to costs of construction, carpentry or other incidental costs associated with alterations or modifications of appliances, components or installation of different equipment and/or systems. Except as required to maintain compatibility with equipment manufactured to be 13 SEER and/or 7.7 HSPF or higher compliant, We are not responsible for providing upgrades, components, parts or equipment required due to the incompatibility of the existing equipment with the replacement system, appliance or component/part, including but not limited to efficiency as mandated by federal, state or local governments.
- We are not responsible for repairs related to inadequacy, lack of capacity, improper installation, mismatched systems, oversized systems, undersized systems, previous repair or design, manufacturer's defect, and any modification to the system or appliance.
- We are not liable for normal or routine maintenance. We will not pay for repairs or failures that result from the Contract holder's failure to perform normal or routine maintenance. For example, you are responsible for providing maintenance and cleaning pursuant to

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manufacturers' specifications, such as periodic cleaning of heating and air conditioning systems, evaporator coils and condenser coils, as well as periodic filter replacement.

13. We are not liable for the repair or replacement of commercial grade equipment, systems or appliances. We shall pay no more than \$1,000 in aggregate for professional series or like appliances such as, but not limited to, brand names such as Sub Zero, Viking, Wolf, Bosch, Jenn-Air, GE Monogram, Thermador, and etc.

14. We reserve the right to obtain a second opinion at Our expense.

15. We are not responsible for any repair, replacement, installation, or modification of any covered system or appliance arising from a manufacturer's recall or defect of said covered items, nor any covered item while still under an existing manufacturer's, distributor's, or in-home warranty.

16. We reserve the right to offer cash back in lieu of repair or replacement in the amount of Our actual cost (which at times may be less than retail) to repair or replace any covered system, component or appliance.

17. We are not responsible for the repair or replacement of any system or appliance or component or part thereof that has been previously, or is subsequently, determined to be defective by the Consumer Product Safety Commission or the manufacturer and for which either has issued, or issues, a warning or recall, or which is otherwise necessitated due to failure caused by the manufacturer's improper design, use of improper materials, formula, manufacturing process or other manufacturing defect.

18. We will not pay for the repairs or replacement of any covered systems or appliances if they are inoperable as a result of known or unknown pre-existing conditions, deficiencies and/or defects.

19. You agree that We are not liable for the negligence or other conduct of the Service Provider, nor are We an insurer of Service Provider's performance. You also agree that We are not liable for consequential, incidental, indirect, secondary, or punitive damages. You expressly waive the right to all such damages. Your sole remedy under this agreement is recovery of the cost of the required repair or replacement, whichever is less. You agree that, in no event, will Our liability exceed \$1500 per contract item for access, diagnosis and repair or replacement.

G. Mediation

In the event of a dispute over claims or coverage you agree to file a written claim with Us and allow Us thirty (30) calendar days to respond to the claim. The parties agree to mediate in good faith before resorting to mandatory arbitration in the State of Nevada.

Except where prohibited, if a dispute arises from or relates to this Agreement or its breach, and if the dispute cannot be settled through direct discussions you agree that:

1. Any and all disputes, claims and causes of action arising out of or connected with this Agreement shall be resolved individually, without resort to any form of class action, and exclusively by the American Arbitration Association in the state of Nevada under its Commercial Mediation Rules. Controversies or claims shall be submitted to arbitration regardless of the theory under which they arise, including without limitation contract, tort, common law, statutory, or regulatory duties or liability.

2. Any and all claims, judgments and awards shall be limited to actual out-of-pocket costs incurred to a maximum of \$1500 per claim, but in no event attorneys' fees.

3. Under no circumstances will you be permitted to obtain awards for, and you hereby waive all rights to claim, indirect, punitive, incidental and consequential damages and any other damages, other than for actual out-of-pocket expenses, and any and all rights to have damages multiplied or otherwise increased. All issues and questions concerning the construction, validity, interpretation and enforceability of this Agreement, shall be governed by, and construed in accordance with, the laws of the State of Nevada, U.S.A. without giving effect to any choice of law or conflict of law rules (whether of the State of Nevada or any other jurisdiction), which would cause the application of the laws of any jurisdiction other than the State of Nevada.

H. Severability

If any provision of this Agreement is found to be contrary to law by a court of competent jurisdiction, such provision shall be of no force or effect; but the remainder of this Agreement shall continue in full force and effect.

I. BUILDING AND ZONING CODE REQUIREMENTS OR VIOLATIONS

1. We will not contract for services to meet current building or zoning code requirements or to correct for code violations, nor will it contract for services when permits cannot be obtained. We will not pay for the cost to obtain permits.

2. Except as required to maintain compatibility with equipment manufactured to be 13 SEER and/or 7.7 HSPF or higher compliant, We are not responsible for upgrade or additional costs or expenses that may be required to meet current building or zoning code requirements or correct for code violations. This includes city, county, state, federal and utility regulations and upgrades required by law.

J. MULTIPLE UNITS AND INVESTMENT PROPERTIES

1. If the contract is for duplex, triplex, or fourplex dwelling, then every unit with in such dwelling must be covered by Our contract with applicable optional coverage for coverage to apply to common systems and appliances.

2. If this contract is for a unit within a multiple unit of 5 or more, then only items contained within the confines of each individual unit are covered. Common systems and appliances are excluded.

3. Except as otherwise provided in this section, common systems and appliances are excluded.

K. TRANSFER OF CONTRACT & RENEWALS

1. If your covered property is sold during the term of this contract You must notify Us of the change in ownership and submit the name of the new owner by phoning 1-866-681-3656 in order to transfer coverage to the new owner.

2. You may transfer this contract at any time. There is no fee to transfer contract.

3. This contract may be renewed at Our option and where permitted by state law. In that event You will be notified of the prevailing rate and terms for renewal.

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4. If You select the monthly payment option and We elect to renew your contract, We will notify You of applicable rate and terms of renewal during the tenth month of your contract. You will automatically be renewed for a monthly coverage period unless You notify Us in writing 30 days prior to the expiration of the contract. Your first payment for the next contract term will be construed as authorization for month-to-month charges.

L. CANCELLATION

This is a service contract for repair, replacement, or partial replacement of the products listed that are deemed manufactured or sold by the manufacturer. This is not a contract of insurance, residential service, warranty, extended warranty, or implied warranty. You may cancel within the first 30 days of the order date for a refund of the paid contract fees. You may cancel after the first 30 days and You shall be entitled to a pro rata refund of the paid contract fee for the unexpired term, less a \$50 administrative fee. If We do not provide a refund within 45 days of cancellation a ten percent penalty for each 30 day period or portion thereof shall be added to the refund.

This contract shall be non-cancelable by Us except for:

1. Failure by You to pay an amount when due.
 2. You are convicted of a crime which results in an increase in the service required under the service contract.
 3. Fraud or misrepresentation of facts material by You to the issuance of this contract; or in presenting a claim.
 4. An act or omission by You or a violation of any condition of the service contract by You, provided that the act, omission, or violation occurred after the effective date of the service contract and substantially and materially increases the service required under the service contract.
 5. A material change in the nature or extent of the required service or repair which occurs after the effective date of the service contract and which causes the required service or repair to be substantially and materially increased beyond that contemplated at the time that the service contract was issued or sold.
- If We cancel this agreement for one of the reasons listed above You shall be entitled to a pro rata refund of the paid contract fee for the unexpired term, and will not be charged an administrative fee. We will provide 15 days notice prior to cancellation of this contract. All cancellation requests must be submitted in writing.

CHOICE HOME WARRANTY
510 Thornall Street - Edison, NJ 08837 - Toll Free: (888) 531-5408

HWA HV 0711

CHW073383

AA000487

Dolores Bennett

From: Dolores Bennett
Sent: Wednesday, July 27, 2011 2:39 PM
To: Harland Amborn; David Hall
Cc: Ted Bader; Gennady Stolyarov
Subject: RE: Choice Home Warranty

Mr. Hall:

Choice Home Warranty is not registered as a service contract provider in Nevada.

Home Warranty Administrator Of Nevada, Inc. (Org. ID # 113194) is registered as a service contract provider in Nevada, and only has one service contract **approved** for sale in Nevada at this time: Home Service Agreement # HWAADMIN-8/2/10 (Approved: 11/22/10). That contract is under the "Home Warranty Administrators" name and makes no mention of Choice Home Warranty. However, Home Warranty Administrator of Nevada, Inc. has a **pending** form filing (Filing # 25290) in SERFF for a new contract called "Choice Home Warranty" (Home Service Agreement # HWA-NV-0711) listing Home Warranty Administrator Of Nevada, Inc. as the Obligor, and listing Choice Home Warranty as the Administrator.

The cover letter contains both Choice Home Warranty and Home Warranty Administrators logos and reads,

- ❖ Welcome to Choice Home Warranty! You made a wise decision when you chose to protect your home with a home warranty. We appreciate your business and look forward to providing you with quality service for all your home protection needs. To obtain the most value from your new home warranty, please take a moment to read and understand your coverage. Your coverage is dependant on the plan you have selected. Should you have a problem with any of your covered systems or appliances, please call us toll-free at (888)-531-5403. We are available 24 hours a day, 7 days a week, 365 days a year, or simply log on to our website located at www.ChoiceHomeWarranty.com and file your claim online.

However, the agreement reads,

- ❖ Throughout this Agreement the words "We", "Us" and "Our" refer to Home Warranty Administrator of Nevada, Inc. (HWA), 90 Washington Valley Road, Bedminster, NJ 07921, the Obligor of this Agreement and it is backed by the full faith and credit of HWA. This Agreement is administered by Choice Home Warranty (Administrator), 510 Thornall Street, Edison, NJ 08837.

That pending filing is still under review pending the company response to our objections to certain statements, wording and typographical errors in the contract. We will approve the contract after they correct those errors.

Dolores Bennett, ARC, ARM, AIS, AINS

Insurance Examiner
Property & Casualty Section
Nevada Division of Insurance
1818 E. College Parkway, Suite 103
Carson City, NV 89706
direct: (775) 687-0763
main: (775) 687-0700
fax: (775) 687-0787
dbennett@doi.state.nv.us

Visit us online at the [Service Contracts Section](#) for service contract provider requirements, filing information, and more.

From: Harland Amborn
Sent: Wednesday, July 27, 2011 1:39 PM
To: David Hall
Cc: Dolores Bennett
Subject: Choice Home Warranty



Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

Please make any corrections to your mailing address or contact information below.

Provider Name:

Current Certificate Number: NV

Initial Certificate Issued:

Mailing Address:

Contact:

Phone: Ext.

Fax:

E-mail:

The following questions must be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As) in Nevada. Provide supporting documentation filed with the County Clerk of the county in which the company is doing business.

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application?

Yes ____ No ____

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have there been any changes in the percentage of ownership?

Yes ____ No ____

If yes, please attached a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence
6. Percentage of Company Owned
- 7.

CHW073385

AA000489

Page 2 of 5

4. Have there been any changes in the administrator or designated a new administrator since your **last** application?

Yes ____

No ____

Current Administrator is listed as:
Self

List any changes to the current administrator or list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

____ () _____

5. Since the last application, has the applicant or any of the officers listed in question 1 ever:

(a) Been convicted of a felony or any misdemeanor? Yes ____ No ____

(b) Been insolvent or adjudged a bankrupt? Yes ____ No ____

(c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority? Yes ____ No ____

(d) Been fined or had any administrative actions taken by any state or governmental agency or authority in any matter regarding service contracts? Yes ____ No ____

(e) Other than traffic infractions, are there any past/pending criminal or civil actions against any of the applicant's officers or directors? Yes ____ No ____

Note: If any part of Question 3 or 4 is answered "Yes," attach an explanation.

6. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:

Option ____:

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below.

No ____ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells, or offers for sale. Each Year at Renewal: <i>Submit documentation from the insurer verifying that the policy is still current and in full force.</i>
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. Each Year At Renewal: <i>Submit documentation verifying that the security of 40% of unearned gross consideration on all unexpired service contracts sold to Nevada residents. The reserve account shall be maintained exclusively for service contracts in this state. Monthly statements of the reserve account (3 monthly statements) must be submitted to the Division at the end of each calendar quarter.</i>
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: <i>Submit a copy of the most current 10K or 20F form that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.</i>

8. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☐

Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

9. Please provide the following information regarding the service contracts you sell.

A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

If you do not sell your contracts at specific locations, how do you contact the potential customer?

Page 4 of 5

C. Number of service contracts sold to Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

D. If using Financial Security Option 2, complete the following:

Unearned gross considerations* on all unexpired service contracts sold to Nevada residents:

Quarter	Gross Revenue Received from Nevada Residents:	Unearned Gross Considerations	Security Deposit (10% of Unearned Gross Considerations)	Reserve Account (40% of Unearned Gross Considerations)
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

E. Number of service contracts sold to Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

F. Gross Revenue received from Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

G. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2015 \$ _____, _____, _____. _____

Calendar year: 2016 \$ _____, _____, _____. _____

H. Number of customer complaints by Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

Page 5 of 5

10. How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____, 20____

 Name of Service Contract Provider

Telephone No: _____

By

 Signature of Officer in full

 Signature of Officer in full

 Print Name and Title

 Print Name and Title

This renewal application must be verified and signed by two of the officers listed/named on file with the Division of Insurance in Question 2 for service contract business.

Revised 7/5/16

CHW073389

AA000493



Department of Business and Industry

Nevada Division of Insurance

1818 E. College Parkway, Ste 103, Carson City, Nevada 89706 Phone: (775) 687-0700 Fax: (775) 687-0787 Web: doi.nv.gov

Service Contract Provider Application - Renewal

The Certificate of Registration is non-transferable.

Fees are non-refundable.

Please make any corrections to your mailing address or contact information below.

Provider Name:

Current Certificate Number: NV

Initial Certificate Issued:

Mailing Address:

Contact:

Phone:

Ext.

Fax:

E-mail:

The following questions **MUST** be answered before your renewal application can be processed.

1. List all aliases or names under which the company conducts business (Doing Business As) in Nevada. Provide supporting documentation filed with the County Clerk of the county in which the company is doing business.

2. Have there been any changes in the executive officers or in the officers responsible for service contract business since your **last** application? Or has an existing executive officer had any change in any of the information previously submitted?

Yes ____ No ____

If yes, please attach a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence

3. Have there been any changes in the percentage of ownership?

Yes ____ No ____

If yes, please attached a list and include the following information:

1. Name
2. Title
3. Date of Birth
4. Social Security Number
5. Address of Residence
6. Percentage of Company Owned

4. Have there been any changes in the administrator or designated a new administrator since your last application?

Yes ____ No ____

Current Administrator is listed as:

List any changes to the current administrator **or** list the name, address and phone number of any new administrators designated. Attach additional sheets if necessary.

____ () _____

5. Since the last application, has the applicant or any of the officers listed in question 1 or 2 in the last 10 years:

- (a) Been convicted of a felony or any misdemeanor of which an essential element is fraud?

Yes ____ No ____

- (b) Been insolvent or adjudged a bankrupt?

Yes ____ No ____

- (c) Been refused a license or registration (including a license or registration as a service contract provider) or had an existing one suspended or revoked by any state or governmental agency or authority?

Yes ____ No ____

- (d) Been fined or had any administrative actions taken by any state or governmental agency or authority in any matter regarding service contracts?

Yes ____ No ____

- (e) Other than traffic infractions, are there any past/pending criminal or civil actions, in professional capacity, against any of the applicant's officers or directors?

Yes ____ No ____

Note: If any part of Question 4 or 5 is answered "Yes," attach an explanation.

6. In the **last** application, you supplied the following information as proof of your compliance with one of the three options for financial responsibility:

Option ____:

Has there been any change in that information/proof of financial responsibility?

Yes ____ Explain here and attach appropriate documentation for your choice as listed in the table below.

No ____ Attach appropriate documentation for your choice of financial responsibility as highlighted in the table below, to verify that it remains in place.

Service Contract Providers must comply with one of the following:	
Option 1	Purchase a contractual liability insurance policy, which insures the obligations of each service contract the provider issues, sells, or offers for sale. Each Year at Renewal: <u>Submit documentation from the insurer verifying that the policy is still current and in full force.</u> Pursuant to NRS 690C.170(1)(a)(2), the contractual liability policy must contain a provision prohibiting the insurer from terminating the policy until a notice of termination has been mailed or delivered to the Division at least 60 days prior to the termination of the policy.
Option 2	Maintain a reserve account and deposit with the Commissioner security such as a surety bond, securities eligible for deposit pursuant to NRS 682B.030, cash, an irrevocable letter of credit issued by a financial institution approved by the Commissioner, or in any other form prescribed by the Commissioner. The reserve account must be kept separate from the operating accounts of the provider and must be clearly identified as the " (Provider's Name) Nevada Service Contracts Funded Reserve Account " pursuant to NRS 690C.170(1)(b). A provider shall not use any money in a reserve account for any other purpose other than to pay an obligation of the provider under an unexpired service contract (NRS 690C.170(2)). A provider shall maintain the financial security required until both of the following become true: the provider ceases doing business in Nevada and the provider has performed or otherwise satisfied all liabilities and obligations under all unexpired service contracts issued by the provider (NRS 690C.170(3)). Each Year At Renewal: <u>Submit documentation verifying that the security of 40% of unearned gross consideration on all unexpired service contracts sold to Nevada residents.</u> The reserve account shall be maintained exclusively for service contracts in this state. Monthly statements of the reserve account (3 monthly statements) must be submitted to the Division at the end of each calendar quarter.
Option 3	Maintain or be a subsidiary of a parent company that maintains a net worth or stockholders' equity of at least \$100,000,000. Each Year At Renewal: <u>Submit a copy of the most current 10K or 20F form that was filed with the Securities and Exchange Commission. If you are not required to file those reports with the SEC, provide a copy of the most recently audited financial statement.</u>
Please Note	Pursuant to NRS 690C.170(4), if the certificate of registration of a provider has not expired and the provider fails to maintain the financial security or if the financial security is cancelled or lapses, the provider shall not issue or sell a service contract on or after the effective date of such failure until the provider submits to the Commissioner proof satisfactory to the Commissioner that the provider is in compliance with NRS 690C.170.

7. Please review and agree to the following:

- A. The provider agrees to not use any money in a reserve account other than to pay an obligation of the provider under an unexpired service contract. ☐
- B. The provider agrees to maintain the financial security required. ☐
- C. The provider agrees that if the certificate of registration has not expired and the provider fails to maintain the financial security required, including, without limitation, if the financial security is cancelled or lapses, the provider shall not issue or sell a service contract, until the provider submits to the Commissioner proof satisfactory to the Commissioner that the provider is in compliance with NRS 690C.170. ☐

8. Please select the type of service contracts sold by your company (select all that apply):

Computer/Electronic ☐ Vehicle/Road Assistance ☐ Home Appliance/Home Products ☐
Miscellaneous/Other ☐ If Miscellaneous/Other, please explain: _____

9. Please provide the following information regarding the service contracts you sell.

- A. List the service contract form names and form numbers that you sell in Nevada. Please note that these forms must have been previously filed and approved in Nevada before use. Attach additional sheets if necessary to list all the forms, but you do not need to attach copies of the forms.

- B. List the sales locations where you sell the service contracts. Attach additional sheets if necessary.

If you do not sell your contracts at specific locations, how do you contact the potential customer?

C. If using Financial Security Option 2, complete the following: Unearned gross considerations* on all unexpired service contracts sold to Nevada residents for the last 8 quarters:				
Quarter	Gross Revenue Received from Nevada Residents:	Unearned Gross Considerations	**Security Deposit (10% of Unearned Gross Considerations)	Reserve Account (40% of Unearned Gross Considerations)
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				
Ending:				

*Unearned gross consideration on a service contract is the total consideration for the contract multiplied by the fraction of time left on the contract (e.g., \$1,000 one-year contract with 7 months remaining = $1,000 \times 7 / 12 = 583$)

**This renewal application must include funds if there is an increase to the security deposit as calculated above.

D. Number of service contracts sold to Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

E. Gross Revenue received from Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

F. Claims paid – Claims paid on behalf of Nevada residents:

Calendar year: 2015 \$ _____, _____, _____.

Calendar year: 2016 \$ _____, _____, _____.

G. Number of customer complaints by Nevada residents:

Calendar year: 2015 _____

Calendar year: 2016 _____

10. How are complaints handled? _____

The applicant certifies that the service contracts issued in this state meet the requirements set forth in NRS 690C and NAC 690C and, under penalty of perjury, (I) or (we) affirm that the statements made in the foregoing renewal application are true and hereby subscribe thereto.

Dated _____, 20____

Name of Service Contract Provider

Telephone No: _____

By

Signature of Officer in full

Signature of Officer in full

Print Name and Title

Print Name and Title

This renewal application must be verified and signed by two of the officers listed/named on file with the Division of Insurance in Question 2 for service contract business.

SUBSCRIBED and SWORN to before me
this _____ day of _____, _____.
Date Month Year

NOTARY PUBLIC

CERTIFICATE OF SERVICE

Pursuant to NRAP 25(1)(b) and 25(1)(d), I, the undersigned, hereby certify that I electronically filed the foregoing **APPELLANT'S APPENDIX (VOLUME III OF XIV)** with the Clerk of Court for the Supreme Court of Nevada by using the Supreme Court of Nevada's E-filing system on May 12, 2020.

I further certify that all participants in this case are registered with the Supreme Court of Nevada's E-filing system, and that service has been accomplished to the following individuals through the Court's E-filing System as indicated below:

Via Electronic Filing System:

Richard P. Yien
Joanna N. Grigoriev

/s/ Joyce Heilich
An Employee of Holland & Hart LLP