



Stamped Signature Use Agreement

The undersigned broker licensee or sublicensee hereby consents to the use of his/her .JPEG formatted image signature or other ELANY approved electronic formatted signature by those individuals in his/her organization responsible for completing Part C affidavit forms on excess line transactions.

By signing below you acknowledge that you understand that the use of your .JPEG formatted image signature or other ELANY approved electronic formatted signature by any customer service representative or other designated employee constitutes your permission for such submission under your broker license and has the same legal effect and consequences as placing your original signature on a Part C affidavit form.

Please be advised that the New York State Department of Financial Services stated that “Use of a stamped signature on Part C affidavits is permitted, provided the licensee or sublicensee whose signature will be affixed to the affidavit Part C by another establishes:

- 1) Internal office controls which identify and limit who has access to and permission to use the stamp to affix the licensee or sublicensee’s signature, and
- 2) limits use of such signature stamp to Part C affidavits and or other specific documents identified as part of the internal controls. Licensees and sublicensees who fail to establish sufficient internal controls will not be permitted to deny validity of and responsibility for any Part C upon which his/her stamped signature was applied based upon the equitable principle of estoppel.”

By signing below, you are acknowledging that it is your responsibility to control who has access to and permission to use your .JPEG formatted image signature or other ELANY approved electronic formatted signature and that you have instituted proper internal controls.

Name

Signature

Date



**Excess Line Association of New York
ELANY Electronic Filing System**

Producing Broker Registration Form

Producing Broker License Number: BR- _____

Producing Broker Name: _____

Broker Address: _____

Street Address

City

State

Zip

Broker Telephone: _____

Producing Broker Licensee/Sub Licensee:

Name: _____

Phone #: _____ **Fax #:** _____

Email: _____

Producing Broker Customer Service Representative:

Name: _____

Phone #: _____ **Fax #:** _____

Email: _____

===== *ELANY USE ONLY* =====

Profile Created/Admin ID: _____ *ImageRight:* _____

Status: _____ *Date:* _____ *Entered by* _____

Notes/Comments: _____

