

State of New Jersey

License No: 1651137

NPN: 18425739

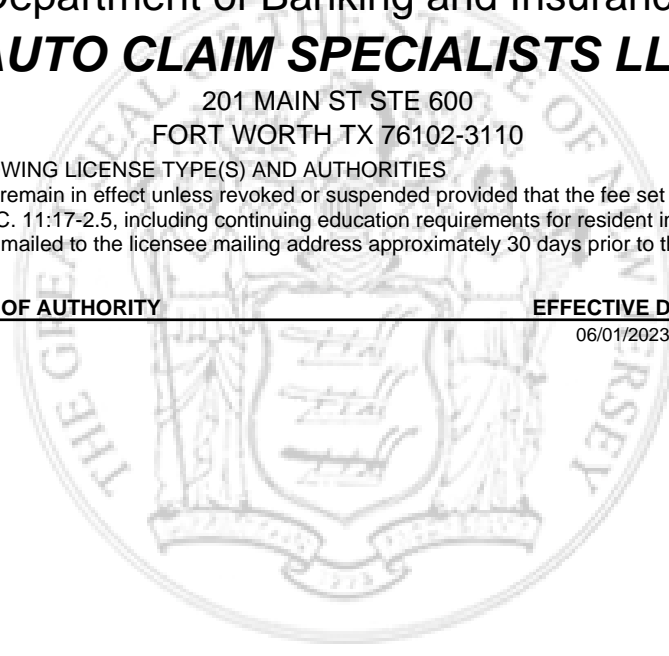
Department of Banking and Insurance
AUTO CLAIM SPECIALISTS LLC

201 MAIN ST STE 600
FORT WORTH TX 76102-3110

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
Public Adjuster		06/01/2023	05/31/2025



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The department maintains an informative website at www.dobi.nj.gov. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

Department Contact Information

web site: www.dobi.nj.gov
phone: (609) 292-4337
fax: (609) 984-5263

The request for any change of license information must be sent to the Department within 30 days of the change.

Make any checks and/or money orders payable to: **STATE OF NEW JERSEY, GENERAL TREASURY**

Mailing Address: Department of Banking and Insurance
20 West State Street
P.O. Box 327
Trenton, NJ. 08625-0327

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