

[Date]

[Producer Name]

[Producer Address]

[City, State, Zip Code]

Re: Compliance Acknowledgment for Producer Appointment

Dear [Producer Name],

In connection with your appointment as a producer for [Company Name], we require your formal acknowledgment and commitment to our compliance standards and regulatory requirements.

By signing this letter, you acknowledge and agree to the following:

- **Licensing:** You confirm that you hold all necessary state licenses and authority required to solicit and negotiate insurance products.
- **Regulatory Compliance:** You agree to comply with all federal and state laws, including but not limited to Anti-Money Laundering (AML) regulations and privacy laws (GLBA/HIPAA).
- **Ethics and Conduct:** You agree to represent the company's products accurately and act in the best interest of the consumer at all times.
- **Continuing Education:** You agree to maintain all mandatory continuing education requirements as dictated by the governing jurisdictions.
- **Reporting:** You agree to notify [Company Name] immediately of any disciplinary actions, criminal charges, or loss of license.

Please sign and return this letter to the Compliance Department by [Due Date].

I hereby acknowledge that I have read, understand, and agree to abide by the compliance requirements set forth by [Company Name].

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Producer Signature

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Date

Sincerely,

[Sender Name]

[Title]

[Company Name]