



# NC DEPARTMENT of INSURANCE

MIKE CAUSEY, COMMISSIONER

AGENT SERVICES

Tel 919.807.6800 Fax 866.565.7854

## VOLUNTARY SURRENDER OF LICENSE OR LICENSES (N.C.G.S. §58-2-65)

I, Jason Johnson NPN 17689133, hereby voluntarily surrender licenses issued to me by the North Carolina Department of Insurance (NCDOI) **for a period of two (2) years** from today's date. I understand and acknowledge that effective immediately, I can no longer perform any activities for which a license from NCDOI is required.

I understand and agree that I may not request re licensure (for any license) from NCDOI during the above-stated period of license surrender. I also understand that submitting an application for re licensure does not guarantee reissuance of license(s) surrendered.

I understand my right to an administrative hearing and to judicial review after such a hearing, and I hereby voluntarily give up those rights.

I understand that this Voluntary Surrender is equivalent to the taking of regulatory action by NCDOI. I also understand that this Voluntary Surrender will be a public record and is not confidential. NCDOI is free to disclose this Voluntary Surrender to third parties upon request or pursuant to any law or policy providing for such disclosure.

I acknowledge that I have had the opportunity to consult with an attorney prior to execution of this Voluntary Surrender.

This 29 day of January, 20216.

  
\_\_\_\_\_  
Signature

Jason Johnson (print name)

Sworn to and subscribed before me

This 29 day of January, 20216  


Notary Public

My Commission expires: 06/06/2028

