Wayne Goodwin | Commissioner of Insurance

AGENT SERVICES

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

	,Michael Wickham	, (NPN .	237704) hereby
	voluntarily surrender all licenses issued to me by the North Carolina Department of Insurance (NCDOI) for a period of5_ 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 relicensure (for any license) from NCDOI during the above-stated period of license surrender. I also understand that submitting an application for relicensure does not guarantee reissuance of license(s) surrendered.			
	I understand my right to an administration and I hereby voluntarily give up those right	ve hearing and to judicionts.	al review after such a	hearing,
	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 opport this Voluntary Surrender.	unity to consult with an	attorney prior to exec	cution of
	This day of			
		Signature		-
		Michael W	hallacyprint name	e) ·
	Sworn to and subscribed before me			2.
	This day of May 2014			
	- Notary Public	1. AMERICAN TO CONTRIBUTE	CE E. RUOPP sion Number 185121 mmission Expires	
	My Commission expires: 0-/4-7		ST 14.00	
1204 M	ail Service Center Raleigh, NC 27699-1204	l tel: 919.807.6800 fa.	x: 919.715.3794 www	w.ncdoi.com

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