



STATE OF HAWAII  
INSURANCE DIVISION  
DEPARTMENT OF COMMERCE & CONSUMER AFFAIRS

**Nonresident Independent Adjuster**  
LENORMAN, DAVID BEN

License Number: 538209

Entity ID: 428299

**Effective Date**  
JUL 03, 2021

**Expiration Date**  
AUG 16, 2024

**Business Address**  
213 EAST DIMOND BLVD  
ANCHORAGE, AK 99515

This will certify that pursuant to the licensing requirements of the State of Hawaii Revised Statutes,  
the person named on this license is authorized to act in the capacity identified above.



Verify license information at  
<http://insurance.ehawaii.gov>  
or scan the QR code with  
your mobile device.