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APPLICATION INSTRUCTIONS

To make application for an Oklahoma Small Lender License, all prescribed forms and additional required exhibits must be fully completed and mailed or delivered to:

Oklahoma Department of Consumer Credit
629 NE 28th St
Oklahoma City, OK 73105

All fees required must be submitted with the application. Upon receipt of a completed application, a licensing examiner will carefully review all documents and an independent investigation will be made into the experience, character, and general fitness of the applicant(s). All applications are reviewed in the order in which they are received.

A complete application package for an Oklahoma Small Lender License is composed of:

I. APPLICATION: These pages are for information on the business to be licensed, including mailing address, location, ownership, etc. Complete all sections that apply. Be sure to sign and notarize. Provide names, addresses, date of birth, and social security numbers for all applicant(s), owners, or partners pursuant to Oklahoma Title 56 § O.S. 240.21A for background investigation.

II. MILITARY SERVICE VERIFICATION: Please complete the Military Service Verification Form if you or your spouse is in Active-Duty status in the Armed Forces and you wish to receive considerations provided by SB1863 Post-Military Service Occupation, Education and Credentialing Act, codified as 59 O.S. §4100 et seq. The information provided will be verified through the Servicemembers Civil Relief Act Website.

III. BOND: A bond in the amount of $25,000.00 (TWENTY-FIVE THOUSAND DOLLARS) for each license, up to a maximum of $200,000.00 (TWO HUNDRED THOUSAND DOLLARS). Be sure all signatures are affixed and include a copy of the bond and all attachments with your application.

IV. RECORD KEEPING AND LOCATION OF EXAMINATION FORMS: Complete these forms to indicate where and how records will be maintained. Remember to sign the certification on the form.
V. AUDITED FINANCIAL STATEMENT: This audited statement should be prepared in accordance with generally accepted accounting principles by a certified public accountant or public accounting firm, neither of which is affiliated with the applicant, and reveal that the applicant has available for regulated loan operations, tangible net worth of at least $50,000.00 (FIFTY THOUSAND DOLLARS) per location.

For sole proprietorship, the owner’s personal financial statement must show net assets of the required amount.

For partnerships or limited liability companies the combined tangible net worth of the partners or members must equal or exceed the required $50,000.00 (FIFTY THOUSAND DOLLARS) per location.

BUSINESS DOCUMENTS

A. Sole Proprietorships

1. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.
2. A Form 1 or Form 2 Affidavit Verifying Lawful Presence in the United States (see attached forms).
3. Name, address, social security number, date of birth, email, and telephone number of the individual.

B. Partnerships

1. A copy of the executed partnership agreement.
2. A certified copy of the Trade Name Report or Certificate of Fictitious Name filed with the Oklahoma Secretary of State, if applicable.
3. A list of the names, addresses, social security numbers, dates of birth, email and telephone numbers of the partners.

C. Oklahoma Limited Partnerships

1. A certified copy of the Certificate of Limited Partnership filed with the Oklahoma Secretary of State.
2. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.
3. A Certificate of Good Standing issued by the Oklahoma Secretary of State.
4. A list of the names, addresses, social security numbers, dates of birth, email and telephone numbers of the partners.
D. Oklahoma Limited Liability Companies

1. A certified copy of the Certificate of Organization or Articles of Organization filed with the Oklahoma Secretary of State.
2. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.
3. A Certificate of Good Standing issued by the Oklahoma Secretary of State.
4. A list of the names, addresses, social security numbers, dates of birth, email and telephone numbers of each major stockholder, officers, and directors of the LLC.

E. Oklahoma Corporation

1. A certified copy of the Certificate of Incorporation or Articles of Incorporation filed with the Oklahoma Secretary of State.
2. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.
3. A Certificate of Good Standing issued by the Oklahoma Secretary of State.
4. A list of the names, addresses, social security numbers, dates of birth, email and telephone numbers of each major stockholder, officers, and directors of the corporation.

F. Foreign Business Entities

1. A certified copy of the Certificate of Qualification (foreign corporation), Certificate of Authority (foreign limited partnership) or Certificate of Registration (foreign limited liability company), filed with the Oklahoma Secretary of State, as applicable.
2. A Certificate of Good Standing issued by the Oklahoma Secretary of State.
3. If the foreign business entity is exempt from obtaining a Certificate of Authority, Registration or Qualification from the Oklahoma Secretary of State, as applicable, please provide the exemptions that are applicable, and a copy of a certificate issued by an authorized officer of the jurisdiction in which the foreign business entity was formed or incorporated evidencing the existence and good standing of the foreign business entity.
4. A certified copy of the Trade Name Report or Fictitious Name Report filed with the Oklahoma Secretary of State, if applicable.
5. A list of the names, addresses, social security numbers, dates of birth, email and telephone numbers of each major stockholder, officers, and directors of the foreign business entity.

Contact the Oklahoma Secretary of State for information concerning any of the business documents.

Oklahoma Secretary of State
2300 N. Lincoln Blvd., Rm. 101
Oklahoma City, OK 73105
(405) 521-3912
VI. FEES FOR INVESTIGATION, LICENSE AND EXAMINATION: When making an application for a license, the applicant shall pay a total of $1900.00 (NINETEEN HUNDRED DOLLARS), which consists of a $700.00 (SEVEN HUNDRED DOLLARS) non-refundable filing fee, a license fee of $500.00 (FIVE HUNDRED) and $700.00 (SEVEN HUNDRED DOLLARS) for the supervision fee for each license.

VII. ADDITIONAL LOCATION LICENSE REQUIREMENTS: If you are applying for an additional location, you must complete:

1. An Oklahoma Small Lender License Application form as described in the Application Instructions above, along with currently dated supporting documents.

2. A Bond Form for $25,000.00 (TWENTY-FIVE THOUSAND DOLLARS) for each location, up to a maximum aggregated amount of $200,000.00 (TWO HUNDRED THOUSAND DOLLARS).

3. A recent audited financial statement showing $50,000 per location in tangible net worth, prepared by a CPA or Accounting Firm.

4. A check or money order for $1900.00 (NINETEEN HUNDRED DOLLARS), which consists of a $700.00 (SEVEN HUNDRED DOLLARS) non-refundable filing fee, a license fee of $500.00 (FIVE HUNDRED) and $700.00 (SEVEN HUNDRED DOLLARS) for the supervision fee for each license, made payable to the Oklahoma Department of Consumer Credit.

PLEASE RETAIN INSTRUCTIONS FOR FUTURE REFERENCE
CHANGES TO A LICENSE

Licenses issued for Oklahoma Small Lenders are issued based on representations made on the application and supporting documents. Any substantial change in the information included in the application must be reported to the Administrator immediately. There is a $25 per license amendment fee.

If any material misrepresentations or unreported changes of circumstances are subsequently discovered, the license is subject to revocation after it has been issued.

Changes in location, ownership, partners, and in the principal parties at interest in a corporation must be submitted in writing for approval thirty (30) Days prior to the effective date of the change.

RENEWAL REQUIREMENTS

Annual renewal of the license is the responsibility of each licensee. The licensee is to submit a renewal application for each license along with a renewal fee of $1250.00 (TWELVE HUNDRED FIFTY DOLLARS) which consists of a $550.00 (FIVE HUNDRED FIFTY DOLLARS) license fee and a $700.00 (SEVEN HUNDRED DOLLARS) supervision fee, to be postmarked on or before the first day of December of each year.

If you are an active-duty service member of the Armed Forces on deployment at the time of annual renewal, please complete the Military Service Verification form. Upon verification, your license effective date will be extended, with no further payment, for up to a year after your active service has been completed.
APPLICATION CHECKLIST

The checklist below is provided to help ensure that you submit a complete application.

TASKS TO BE COMPLETED

☐ APPOINTMENT OF DESIGNATED AGENT

☐ SURETY BOND – BE SURE ALL SIGNATURES ARE PRESENT

☐ AUDITED FINANCIAL STATEMENT PREPARED BY CPA OR ACCOUNTING FIRM

BUSINESS DOCUMENTS

☐ SOLE PROPRIETORSHIP INFORMATION – IF APPLICABLE

☐ PARTNERSHIP INFORMATION – IF APPLICABLE

☐ OKLAHOMA LIMITED PARTNERSHIP INFORMATION- IF APPLICABLE

☐ OKLAHOMA CORPORATION INFORMATION – IF APPLICABLE

☐ OKLAHOMA LIMITED LIABILITY COMPANY INFORMATION – IF APPLICABLE

☐ FOREIGN BUSINESS ENTITY INFORMATION– IF APPLICABLE

☐ RECORD KEEPING AND LOCATION OF EXAMINATION FORMS

VERITEC FORMS

☐ VERITEC TRAINING CERTIFICATE

☐ ACH AUTHORIZATION FORM

☐ FIRST TIME LOGON ADMINISTRATOR REQUEST FORM
APPLICATION FOR OKLAHOMA SMALL LENDER LICENSE

BEFORE THE ADMINISTRATOR )
OF THE DEPARTMENT OF )
CONSUMER CREDIT OF THE )
STATE OF OKLAHOMA IN THE )
MATTER OF THE APPLICATION )
of:

Name of Business to be licensed (include trade name, if applicable)

Legal Name of Applicant

Trade Name of the Applicant in the State of Oklahoma, if applicable

Fictitious name of the applicant in the State of Oklahoma, if applicable, for a Foreign Corporation, Partnership or Limited Liability Company

Website

Email

Type of business: (please check your applicable category)

☐ Sole Proprietorship
☐ OK Limited Partnership
☐ OK Limited Liability Company
☐ Partnership
☐ Foreign Corporation
☐ Foreign Limited Liability Company
☐ OK Corporation
☐ Foreign Limited Partnership
☐ Other
If other, please specify the type of business and include a separate document if necessary

_______________________________________________________________________________________

_______________________________________________________________________________________

Revised May 5, 2022
BUSINESS DOCUMENTS
Please attach all applicable business documents as specified in the license application instructions.

BOND
Please attach a certified copy of a bond in the amount of $25,000.00 for each license.

FEES
Please include payment of $700.00 (Seven hundred dollars) non-refundable filing fee, a license fee of $500.00 (Five hundred dollars) and $700.00 (Seven hundred dollars) for the supervision fee for each license.

Hereby applies to the Administrator of the Department of Consumer Credit of the State of Oklahoma, for an Oklahoma Small Lender License for the calendar year ending December 31, _________________ at the following location:

Street Address of Business Location

<table>
<thead>
<tr>
<th>Street Address of Business Location</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State, and Zip</td>
<td>Fax Number</td>
</tr>
</tbody>
</table>

Principal Office and/or Mailing Address Location

<table>
<thead>
<tr>
<th>Principal office or Mailing Address</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State, and Zip</td>
<td>Fax Number</td>
</tr>
</tbody>
</table>

FOR THE PURPOSE OF SECURING
Applicant makes the foregoing and following sworn statements of fact.
DESIGNATED AGENT

Please indicate the designated registered agent for receipt of service of process within the State of Oklahoma. A resident of the State of Oklahoma as agent upon whom may be served all judicial and other process or legal notice directed to this applicant.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Telephone Number</th>
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<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>City, State and Zip</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

INDIVIDUALS AND SOLE PROPRIETORSHIPS

Please complete if the applicant is an individual or sole proprietorship.

<table>
<thead>
<tr>
<th>Full Name</th>
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<table>
<thead>
<tr>
<th>Social Security Number</th>
<th>Date of Birth</th>
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<tbody>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Telephone Number</th>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing Address (if different from street address)</th>
<th>Email Address</th>
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<tbody>
<tr>
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</tr>
</tbody>
</table>

CORPORATION, LIMITED LIABILITY COMPANY OR PARTNERSHIP

Please complete if the applicant is a corporation, limited liability company or partnership, as applicable. Please list all members, partners, general partners and/or limited partners, as applicable, and attach a separate document if necessary. A limited partnership shall specify which partners are general partners and which partners are limited partners. Please attach a separate document if necessary to include the requested information:

APPLICANT 1

<table>
<thead>
<tr>
<th>Full Name and Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social Security Number</th>
<th>Date of Birth</th>
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</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing Address (if different from street address)</th>
<th>Email Address</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Revised May 5, 2022
### APPLICANT 2

<table>
<thead>
<tr>
<th>Full Name and Title</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security Number</td>
<td>Date of Birth</td>
</tr>
<tr>
<td>Street Address</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>Mailing Address (if different from street address)</td>
<td>Email Address</td>
</tr>
</tbody>
</table>

### APPLICANT 3

<table>
<thead>
<tr>
<th>Full Name and Title</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security Number</td>
<td>Date of Birth</td>
</tr>
<tr>
<td>Street Address</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>Mailing Address (if different from street address)</td>
<td>Email Address</td>
</tr>
</tbody>
</table>

### APPLICANT 4

<table>
<thead>
<tr>
<th>Full Name and Title</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security Number</td>
<td>Date of Birth</td>
</tr>
<tr>
<td>Street Address</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>Mailing Address (if different from street address)</td>
<td>Email Address</td>
</tr>
</tbody>
</table>
QUESTIONS TO BE ANSWERED BY APPLICANT

1. Do you have available for the operation of the business tangible net assets for each location of at least $50,000.00 (FIFTY THOUSAND DOLLARS)? □ Yes   □ No

2. Have you ever been convicted of a felony?  □ Yes   □ No

If yes, please furnish details and attach additional sheets if necessary for each applicant. You must also submit a certified copy of the Judgement and Sentence of the Court with this application.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

MILITARY SERVICE VERIFICATION

Check the appropriate box if any of the following apply to you. If any apply, please complete the “Military Service Verification” form on the next page for expedited processing:

☐ I am a member of the Armed Forces
☐ My spouse is a member of the Armed Forces
☐ My spouse is on active duty within this state
☐ My spouse is a permanent resident of this state for the 6 months prior to assignment to active duty
☐ My spouse is a permanent resident of this state during the period of active duty
MILITARY SERVICE VERIFICATION FORM

Please complete the information below, in its entirety, for the ACTIVE SERVICE MEMBER.

<table>
<thead>
<tr>
<th>Full Name of Service Member</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security Number of Service Member</td>
<td></td>
</tr>
<tr>
<td>Birth Date of Service Member</td>
<td></td>
</tr>
<tr>
<td>Active-Duty Status Date (if available)</td>
<td></td>
</tr>
</tbody>
</table>

Check one:

- □ New License Application
- □ Renewal Application
NOTARY PUBLIC

Before me, the undersigned, personally appeared and being first duly sworn states that the applicant has executed this application this _____________day of ________________, 20_____________________, and acknowledges that applicant is duly authorized to execute the application, and that all statements and representations made are true and correct to the best of applicant's knowledge and belief, and that all statements and supporting schedules are made for the purpose of inducing the Administrator of the Department of Consumer Credit of the State of Oklahoma to grant said application.

______________________________________________       ___________________________________________
Name of Applicant 1         Signature of Applicant 1

______________________________________________       _________________________________________
Name of Applicant 2                               Signature of Applicant 2

______________________________________________       _________________________________________
Name of Applicant 3                                         Signature of Applicant 3

______________________________________________       _________________________________________
Name of Applicant 4                                         Signature of Applicant 4

STATE OF

COUNTY OF

SUBSCRIBED AND SWORN TO before me this ___________day of _________________, 20_____________

______________________________________
Notary Public

(Seal)

Commission Number

My Commission Expires

Revised May 5, 2022
EXAMINATION & RECORD KEEPING INFORMATION

Please complete the form below to designate where and how records will be kept. Remember to sign the certification on the next page. If the applicant/licensee requests approval to keep records outside Oklahoma and/or keep such records in electronic or other forms of reproduction as authorized under the Oklahoma Small Lender Act Title 59 O.S. § 3150.12 (A), please fill out the form on the next page as well. It is understood that, without the prior written approval of the request by the Administrator of the Department of Consumer Credit, hardcopies of records must be maintained within Oklahoma and made available for examination at an office in Oklahoma.

Name of Applicant/Licensee____________________________________ License No. ____________________

Main office address: ____________________________________________________________

City, State and Zip: ____________________________________________________________

Contact person for questions on this request: ___________________________________________

Telephone and Area Code_____________________________________________________________________

Location where you intend to keep records (if different from above)

Address: ____________________________________________________________________________

City, State and Zip: ____________________________________________________________

RECORDS TO BE MAINTAINED IN A FORM OTHER THAN HARDCOPY

The applicant/licensee requests approval to record, copy or reproduce books, accounts, and records in photographic, electronic or any form other than a hardcopy and will provide equipment necessary to access records for the purpose of an examination.

Describe how books, accounts and records will be maintained.

_________________________________________________________________________________

Describe how books, accounts and records will be made accessible to the Department for the purpose of an examination.

_________________________________________________________________________________
LOCATION OF EXAMINATION

The applicant/licensee requests approval to maintain books, accounts, and records outside Oklahoma. To facilitate a full examination of this license hereby agrees to pay the expenses of the Administrator’s representative(s) in conducting an examination of your books and records pertaining to loans made in Oklahoma.

The Department expects the applicant/licensee to pay the reasonable and necessary expenses for the Administrator or representative(s) to examine the books, accounts, and records at the place where they are maintained.

The above expenses are understood to be in addition to the $700.00 (SEVEN HUNDRED DOLLARS) minimum supervision fee.

It is further understood that this agreement is being made so that _______________________________________ may keep records at a location outside the State of Oklahoma.

Contact person at location ________________________________________________________________

Address _______________________________________________________________________________

City, State and Zip _______________________________________________________________________

Office hours _____________________________________________________________________________

Describe space available for examination: ______________________________________________________

CERTIFICATION

I, ____________________________________________________________ (Name and Title), a duly authorized officer of Applicant/Licensee

agree to maintain the books, records, and accounts of the applicant/licensee in compliance with this record keeping request, which is submitted to the Oklahoma Department of Consumer Credit.

_________________________________     _________________________________________
Signature               Date
VERIFICATION OF LAWFUL PRESENCE IN THE UNITED STATES

All natural persons, including sole proprietorships, applying for a license from the Department of Consumer Credit must verify their lawful presence in the United States in accordance with Title 56 O.S. § 71 (H), before a license is issued.

Attached are two affidavits, labeled as Forms 1 and 2. Each person will choose one affidavit to sign.

UNITED STATES CITIZEN FORM

NEW APPLICATION. If you are a United States citizen, you will sign Form 1.

RENEWALS. United States citizens are not required to submit a new affidavit for license renewal.

QUALIFIED ALIEN FORM

NEW APPLICATION. If you are a qualified alien and you are in the United States lawfully under the Federal Immigration and Naturalization Act, you will sign Form 2 and attach documentation such as a permanent resident card.

RENEWALS. Qualified aliens must submit a new affidavit for each license renewal.

NOTICE TO APPLICANT

You are either a United States citizen OR a qualified alien. Please do not submit both forms. The affidavit must be fully notarized, including the notary public’s commission number. For states where commission numbers are not issued, please place “N/A” in the commission number space.

This is a requirement from the State of Oklahoma. If you need further information, you may review the statute by visiting the following web link:

OKLAHOMA STATE COURTS NETWORK
AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES
Form 1 - For U. S. Citizens

Section A (Applicant Information)

Affidavit of:

__________________________________________________________
Name of Individual Applicant

Section B (Notary Public)

STATE OF __________________
COUNTY OF ________________

__________________________________________________________
Printed Name of Individual Applicant

of lawful age, being first duly sworn, upon oath states under penalty of perjury as follows:

I am a United States Citizen.

__________________________________________________________
Signature of Applicant

Subscribed and sworn to or affirmed before me this ________day of _____________, 20______.

_______________________________
(Seal)
Notary Public

_______________________________
Commission Number

_______________________________
My Commission Expires
AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES
Form 2 - For Qualified Aliens

Please type or print clearly. You must include a copy of both the front and back of your green card with this form.

<table>
<thead>
<tr>
<th>Section A (Applicant Information)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affidavit of:</td>
</tr>
<tr>
<td>Full Name of Individual Applicant</td>
</tr>
<tr>
<td>Social Security Number</td>
</tr>
<tr>
<td>Date of Birth</td>
</tr>
<tr>
<td>Company Name</td>
</tr>
<tr>
<td>Nationality</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section B (Notary Public)</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATE OF _______________</td>
</tr>
<tr>
<td>COUNTY OF _______________</td>
</tr>
<tr>
<td>Printed Name of Individual Applicant</td>
</tr>
<tr>
<td>Of lawful age, being first duly sworn, upon oath states under penalty of perjury as follows:</td>
</tr>
<tr>
<td>I am a qualified alien under the Federal Immigration and Naturalization Act, and I am lawfully present in the United States.</td>
</tr>
<tr>
<td>Signature of Applicant</td>
</tr>
<tr>
<td>Subscribed and sworn to or affirmed before me this ______day of _______<em><strong><strong>, 20</strong></strong></em>.</td>
</tr>
<tr>
<td>(Seal)</td>
</tr>
<tr>
<td>Notary Public</td>
</tr>
<tr>
<td>Commission Number</td>
</tr>
<tr>
<td>My Commission Expires</td>
</tr>
</tbody>
</table>

Revised May 5, 2022
OKLAHOMA SMALL LENDER DATABASE REQUIREMENT

The Oklahoma Small Lenders Act requires a licensee to verify outstanding amounts by using a private database provider approved by the Administrator Title 59 O.S. § 3150.10 (C).

The Administrator has approved Veritec Solutions as the database provider for the Oklahoma Small Lender Database System. However, once the applicant is approved for a license, the licensee must first go through and complete the Licensee On-Demand Training Module.

LICENSEE ON-DEMAND TRAINING MODULE INSTRUCTIONS

Veritec Solutions requires the Oklahoma Small Lender licensee to gain access to the real-time database. The licensee must complete the “On-Demand Training Module.”

On-Demand Training Module Instructions for the Oklahoma Small Lender licensee.

1. Go to www.Veritecs.com
2. Click the Training link
3. Click the PIN Login link
4. Enter your PIN number (FLXXXXXX)
5. Click the Check Provider button
6. Click the Continue button under the ON Demand Training
7. Agree to the Terms of the On-Demand Training
8. Click the On-Demand Training Modules (displayed on the left side)
9. Complete the Training Exercise

The Oklahoma Small Lender licensee must provide the following forms before given access to the database. These forms are available in the State of Oklahoma Small Lender Database System: Licensee Welcome Package, which will be sent to the licensee from Veritec Solutions.

1. A copy of the completed Training Certificate.
2. The ACH Authorization Form.
3. The first time Log-on Administrator Request Form.

Please fax the completed documents to (904) 421-7160 or email the completed documents to email@veritecs.com. All questions concerning this information or the process of completing the forms must be directed to Veritec Solutions.

Veritec Solutions
6735 Southpoint Drive South, Suite 300
Jacksonville, FL 32216
Phone (877) 655-6261
Fax (904) 421-7160
www.oksld.com

Revised May 5, 2022