

NOTICE

The State of Oklahoma recently passed an immigration bill known as House Bill 1804, the Oklahoma Taxpayer and Citizen Protection Act of 2007. This bill went into effect on November 1, 2007.

One of the provisions of the bill is the requirement that all natural persons, including Sole Proprietorships, obtaining a license from all State Agencies must show lawful presence in the United States.

Attached are two affidavits (each person will choose one of these to sign):

- If you are a United States citizen, you will sign Form 1
- If you are a qualified alien and you can prove you are in the United States lawfully under the Federal Immigration and Naturalization Act, you will sign Form 2

You are either a citizen OR a qualified alien -- please do not submit both forms. Make additional copies of the forms as needed. These affidavits must be notarized. We cannot accept faxed or emailed copies of these forms. You will need to mail them to us. Under Oklahoma law, we cannot issue your license without the proper affidavit(s). United States citizens are not required to submit a new affidavit for license renewals. Qualified aliens must submit a new affidavit for each license renewal.

This is a requirement of the State of Oklahoma; our Department has no authority to address it. If you need further information, you may review the text of the bill by visiting the following web link:

http://www.oscn.net/applications/oscn/deliverdocument.asp?id=448995&hits

As always, we appreciate your spirit of cooperation.

Oklahoma Department of Consumer Credit

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Form 1 - For U. S. Citizens

Section A (Applica	nt Information)
Affidavit of:	
Name of Individual Applicant Compar	y Name
Section B (Not	ary Public)
STATE OF	
COUNTY OF	
Printed Name of Individual Applicant sworn, upon oath states under penalty of perjury as follow	, of lawful age, being first duly
I am a United States citizen.	
	Signature of Applicant
Subscribed and sworn to or affirmed before me this day	y of, 20
	Notary Public
(Seal)	Commission Number
	My Commission Expires

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Oklahoma Department of Consumer Credit

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Form 2 - For Qualified Aliens

Sec	tion A (Applicant's Information)	
Please type or print clearly. You must include	a copy of both the front and b	ack of your green card with this form.
Full Legal Name of Applicant:		
Date of Birth:	Social Security Number:	
Nationality:		
Company Name:		
	Section B (Notary)	
STATE OF	_	
COUNTY OF	_	
	, of lawful age, being fi	rst duly sworn, upon oath
Printed Name of Individual Applicant states under penalty of perjury as follows:		
I am a qualified alien under the Federal ImmigraStates.	ration and Naturalization Act, an	d I am lawfully present in the United
	Signature of Applic	cant
Subscribed and sworn to or affirmed before me	e this day of	, 20
		Notary Public
(Seal)		Commission Number
		My Commission Expires

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Pawnbroker License Application
Oklahoma Dept. Of Consumer Credit: 3613 NW 56th, Suite 240 Oklahoma City, OK 73112-4512
Ph: (405) 521-3653 Fax: (405) 601-7639 Toll-Free: (800) 448-4904
http://www.ok.gov/okdocc

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LICENSE APPLICATION INSTRUCTIONS

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

Oklahoma Department of Consumer Credit 3613 NW 56th, Suite 240 Oklahoma City, OK 73112-4512

All fees required must be submitted with the application. Upon receipt of a complete package, a staff member 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 A PAWNBROKER 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 social security number and date of birth for the applicant (the owner(s) or partners) per Oklahoma Statute §56-240.21A for background investigation.
- **II. SURETY BOND:** A bond in the amount of \$5,000.00 (FIVE THOUSAND DOLLARS) for each license. Be sure all signatures are affixed and include a copy of the bond and all attachments with your application.
- III. FINANCIAL STATEMENT: This statement shall reveal that the applicant has available for regulated loan operations, net assets of at least \$25,000.00 (TWENTY-FIVE THOUSAND DOLLARS). For sole proprietorship, the owner's personal financial statement must show assets of the required amount. For partnerships or limited liability companies the combined assets of the partners or members must equal or exceed the required \$25,000.00 (TWENTY-FIVE THOUSAND DOLLARS). If filing as a corporation, please submit the most recent balance sheet. This statement must be signed by the owner or an officer of the company or corporation, dated and notarized.

IV. A COPY OF ALL BASIC DOCUMENTS ESTABLISHING THE ENTITY:

A. SOLE PROPRIETORSHIP:

- 1. A copy of the Certificate of Fictitious Name.
- 2. A Form 1 or Form 2 Affidavit showing lawful presence in the United States (See attached forms)

B. GENERAL PARTNERSHIPS:

- 1. A copy of the partnership agreement signed by all parties involved.
- 2. If the partnership does business under an assumed or fictitious name, supply a copy of the Certificate of Fictitious Name.
- **3.** A list of the names, addresses and telephone numbers of the partners.

C. LIMITED PARTNERSHIPS:

- A copy of the Limited Partnership Certificate filed with the Secretary of State. Such copy must show the date the document
 was filed.
- 2. If the partnership does business under an assumed or fictitious name, supply a copy of the Trade Name Report filed with the Secretary of State.
- **3.** A list of the names, addresses and telephone numbers of the partners.

D. LIMITED LIABILITY COMPANIES:

- 1. A copy of the Certificate of Organization or Articles of Organization filed with the Secretary of State.
- 2. If doing business using a fictitious name, supply a copy of the Trade Name Report filed with the Secretary of State.
- 3. A list of the names, addresses and telephone numbers of each major stockholder, officers and directors of the LLC.

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E. DOMESTIC CORPORATIONS:

- 1. A copy of the Certificate of Incorporation or Articles of Incorporation filed with the Secretary of State.
- 2. If doing business using a fictitious name, supply a copy of the Trade Name Report filed with the Secretary of State.
- 3. A list of the names, addresses and telephone numbers of each major stockholder, officers and directors of the corporation.

F. FOREIGN CORPORATIONS:

- 1. A copy of the Certificate of Incorporation or Articles of Incorporation.
- 2. A Certificate of Authority showing that the applicant is authorized to transact business in their state of incorporation or in the State of Oklahoma.
- 3. If your business falls under one of the exemptions on the Secretary of State's instruction sheet, highlight the exemptions that apply and submit a copy with your application.
- **4.** A list of the names, addresses and telephone numbers of each major stockholder, officers and directors of the Foreign Corporation.

For information concerning above items, contact:

Oklahoma Secretary of State 2300 N. Lincoln Blvd., Room 101 Oklahoma City, OK 73105 (405) 521-3912

- G. FEE FOR INVESTIGATION, LICENSE AND EXAMINATION: When making an application for a license, the applicant shall pay a total of \$965.00 (NINE HUNDRED SIXTY FIVE DOLLARS) which includes a \$325.00 (THREE HUNDRED TWENTY-FIVE DOLLARS) non-refundable investigation fee, \$240.00 (TWO HUNDRED FORTY DOLLARS) for each license annually provided and \$400.00 (FOUR HUNDRED DOLLARS) examination fee per the Oklahoma Pawnshop Act for the current calendar year.
- H. ADDITIONAL LOCATION LICENSE REQUIREMENTS: If you are applying for an additional location, you must complete:
 - 1. The main Application;
 - 2. A Bond Form for \$5,000.00 (FIVE THOUSAND DOLLARS) for each additional location;
 - 3. A check or money order for \$640.00 (SIX HUNDRED FORTY DOLLARS), which consists of an annual fee of \$240.00 (TWO HUNDRED FORTY DOLLARS) and \$400.00 (FOUR HUNDRED DOLLARS) for the annual examination fee, made payable to the Oklahoma Department of Consumer Credit;
 - A recent financial statement or balance sheet signed by the owner, officer, member or partner of the company or corporation, dated and notarized.

PLEASE RETAIN INSTRUCTIONS FOR FUTURE REFERENCE

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LICENSEE CHANGES

Licenses issued under the Oklahoma Pawnshop Act are issued on the basis of 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.

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. There is a \$25 per license amendment fee.

RENEWAL REQUIREMENTS

Annual renewal of the license is the responsibility of each licensee. The licensee is to submit a renewal application, renewal fee of \$640.00 (SIX HUNDRED FORTY DOLLARS), which includes \$240.00 (TWO HUNDRED FORTY DOLLARS) annual license fee and examination fee of \$400.00 (FOUR HUNDRED DOLLARS) to be postmarked on or before the first day of December of each year. (All renewals that are not postmarked by December 1st will be subject to a \$10 per day late fee, up to 30 days.)

LICENSE APPLICATION CHECKLIST

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

TASKS TO BE COMPLETED:

- I. **APPLICATION** SIGNED AND NOTARIZED
- II. APPOINTMENT OF DESIGNATED AGENT
- III. FINANCIAL STATEMENT MOST RECENT SIGNED AND NOTARIZED
- IV. DOCUMENTS ESTABLISHING ENTITY:
 - a. **SOLE PROPRIETORSHIP INFORMATION** IF APPLICABLE
 - b. **PARTNERSHIP INFORMATION** IF APPLICABLE
 - c. **DOMESTIC CORPORATION INFORMATION** IF APPLICABLE
 - d. **LIMITED LIABILITY INFORMATION** IF APPLICABLE
 - e. **FOREIGN CORPORATION INFORMATION** IF APPLICABLE
- V. RECORD KEEPING LOCATION

Please contact the Oklahoma Department of Commerce for information regarding additional licensing you may need at (800) 879-6552 or visit their website at http://www.okcommerce.gov/Start-A-Business/Start-Or-Register-A-Business

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APPLICATION for OKLAHOMA PAWNBROKER 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				
This application will not be processed unless accompanied by all required exifees as follows:	nibits(as reflected on the Licens	e Application Instructions) and the		
A. \$325.00 (THREE HUNDRED TWENTY-FIVE DOLLARS) non-r DOLLARS) Application fee; \$400.00 (FOUR HUNDRED DOLLAR		240.00 (TWO HUNDRED FORTY		
B. Every applicant shall file a bond in the amount \$5,000.00 (FIVE THO				
c. Financial Statement.				
Pursuant to, and in accordance with the provisions of the OKLAHOMA PAV	VNSHOP ACT, and for the purp	oses in said law set forth,		
Name of Applicant				
HTTP://				
Website	E-Mail			
I am (please check your applicable category)				
A PersonJoint Stock Company or Trust	Corporation			
Association Co-Partnership	Limited Liability Company			
With the principal office and/or mailing address located:				
Street address		Telephone Number		
City, State and Zip		Facsimile		
Hereby applies to the Administrator of the Department of Consumer Cre	dit of the State of Oklahoma,	for a Pawnbroker License for the		
calendar year ending December 31,, at the following location;	,			
Street Address of Business Location		Telephone Number		
City, State and Zip For the purpose of securing same, applicant makes the foregoing and follow	ving sworn statements of fact:	Facsimile		
DESIGNATED AGENT:				
Full Name	Telephone Number			
Address	City, State and Zip			

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(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.)

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To be completed only if the applicant is an individual:

uii i tu	me	Social Security Number	Date of Birth		
В.	To be completed only if the applicant is a partnership:				
	Full Name of Partner	Full Name of Partner			
	Social Security Number Date of Birth	Social Security Number	Date of Birth		
ive A	rticles of Limited Partnership been filed with the Secretary of State	Yes No			
C.	To be completed only if applicant is a limited liability companion	y:			
	Full Name of Member	Full Name of Member			
	Social Security Number Date of Birth	Social Security Number	Date of Birth		
ave A	rticles of Limited Liability been filed with the secretary of State?	Yes No			
D.	To be completed only if applicant is a corporation, association, joint stock company or trust: OFFICERS:				
	Full Name of President	Full Name of Vice President			
	Social Security Number Date of Birth	Social Security Number	Date of Birth		
	Full Name of Treasurer	Full Name of Secretary			
	Social Security Number Date of Birth	Social Security Number	Date of Birth		
	DIRECTORS AND TRUSTEES:				
	Full Name of Director/Trustee	Full Name of Director/Trustee			
	Full Name of Director/Trustee Social Security Number Date of Birth Note: If there are additional officers, directors or trustees, please	Social Security Number	Date of Birth		
	Social Security Number Date of Birth	Social Security Number specify using additional sheets if necessary.	Date of Birth		
	Social Security Number Date of Birth Note: If there are additional officers, directors or trustees, please	Social Security Number specify using additional sheets if necessary.	Date of Birth		
	Social Security Number Date of Birth Note: If there are additional officers, directors or trustees, please NAME AND RESIDENCE ADDRESS OF EACH OFFICER	Social Security Number specify using additional sheets if necessary. OR MAJOR STOCKHOLDER:	Date of Birth		

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Fill out the section below to designate where and how records will be kept in Oklahoma. Name of Applicant/Licensee: Address where records will be kept: City, State and Zip: Contact person for questions on this request: Telephone: (_____) 1. Do you have available for the operation of the business net assets of at least \$25,000.00 (TWENTY FIVE THOUSAND DOLLARS)? Yes______ No_____ 2. Is there now pending any legal, administrative actions or proceedings against you? Have you ever entered a plea of guilty or nolo contendere to, or been convicted of a felony or a misdemeanor; other than a traffic violation, involving fraud, misrepresentation or deceit? Yes_____ No____ (If yes, furnish details. Attach extra sheets if necessary).

	NOTARY PUBLIC
20, and acknowledges that applicant is duly authorized to execute	orn states that the applicant has executed this application thisday of, e the application, and that all statements and representations made are true and correct to the porting schedules are made for the purpose of inducing the Administrator of the Department
Name of Applicant	Signature of Applicant
Name of Additional Applicant	Signature of Additional Applicant
STATE OF	
COUNTY OF	
SUBSCRIBED AND SWORN TO before me thisday of _	
(Seel)	Notary Public
(Seal)	Commission Number
	My Commission Evniras