Scott Lesher
Administrator

Brad Henry
Governor

STATE OF OKLAHOMA
DEPARTMENT OF CONSUMER CREDIT

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 (Applicant Information)

Affidavit of:

_____ _____

Name of Individual Applicant Company Name

Section B (Notary Public)

STATE OF _____

COUNTY OF _____

_____, of lawful age, being first duly Printed Name of Individual Applicant 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_____.

_____

Notary Public

(Seal)

_____

Commission Number

_____

My Commission Expires

Oklahoma Department of Consumer Credit

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Form 2 - For Qualified Aliens

Section A (Applicant's Information)

Please type or print clearly. **You must include a copy of both the front and back 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 first duly sworn, upon oath
Printed Name of Individual Applicant
states under penalty of perjury as follows:

I am a qualified alien under the Federal Immigration and Naturalization Act, and I am lawfully present in the United States.

_____
Signature of Applicant

Subscribed and sworn to or affirmed before me this _____ day of _____, 20_____.

_____
Notary Public

(Seal)

_____
Commission Number

_____
My Commission Expires

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LICENSE APPLICATION INSTRUCTIONS

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

Oklahoma Department of Consumer Credit
4545 N. Lincoln Blvd., Suite 164
Oklahoma City, OK 73105-3403

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 Credit Services Organization 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.

II. **BOND:** A bond in the amount of $10,000.00 (TEN THOUSAND DOLLARS) for each location. Be sure all signatures are affixed and include a copy of the bond and all attachments along with your application.

III. **FINANCIAL STATEMENT:** If filing as a partnership, each partner must file a financial statement. Corporate applicants must file the most recent balance sheet. The ***statement must be recent, signed and dated by the owner, member or an officer of the company and notarized.***

IV. **TRUST ACCOUNT:** Satisfactory evidence from a federally insured financial institution in Oklahoma of the existence of a trust account in this state. If no funds are collected from the consumer up front, then you MUST include a letter with this application stating such.

V. **FEES FOR INVESTIGATION, LICENSE AND EXAMINATION:** When making an application for a license, the applicant shall pay $300.00 (THREE HUNDRED DOLLARS) non-refundable investigation fee, $200.00 (TWO HUNDRED DOLLARS) for each license annually provided and $400.00 (FOUR HUNDRED DOLLARS) examination fee per the Credit Services Organization Act for the current calendar year.

PLEASE RETAIN INSTRUCTIONS FOR FUTURE REFERENCE

LICENSEE CHANGES

Licenses issued under the Oklahoma Credit Service Organization 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.

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

APPLICATION FOR CREDIT SERVICES ORGANIZATION 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 exhibits (as reflected on the License Application Instructions) and the statutory fees as follows:

A. $300.00 (THREE HUNDRED DOLLARS) non-refundable Investigation fee; $200.00 (TWO HUNDRED DOLLARS) Application fee; $400.00 (FOUR HUNDRED DOLLARS) Examination fee.
B. Financial Statement.

Pursuant to, and in accordance with the provisions of the Oklahoma Credit Services Organization Act, and for the purposes in said law set forth,

_____
Name of Applicant

HTTP:// _____ _____
Website E-Mail

I am *(please check your applicable category)*

____ A Person
____ Association
____ Joint Stock Company or Trust
____ Co-Partnership
____ Corporation
____ 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 Credit of the State of Oklahoma, for a Credit Services Organization License for the calendar year ending December 31, _____, at the following location;

_____ _____
Street Address of Business Location Telephone Number

_____ _____
City, State and Zip Facsimile

The applicant has a trust account at the following federally insured financial institution, which is separate from the applicant's operating or personal account:

_____ _____
Institutional Name and Address Account Number
(Attach evidence, such as a recent bank statement or letter from bank officer)

For the purpose of securing same, applicant makes the foregoing and following sworn statements of fact:

DESIGNATED AGENT:

_____ _____
Full Name Telephone Number

_____ _____
Address City, State and Zip

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.

A. To be completed only if the applicant is an individual:

_____
Full Name

B. To be completed only if the applicant is a partnership:

_____ _____
Full Name of Partner Full Name of Partner

_____ _____
Full Name of Partner Full Name of Partner

Have Articles of Limited Partnership been filed with the Secretary of State? Yes___ No___

C. To be completed only if applicant is a limited liability company:

_____ _____
Full Name of Member Full Name of Member

_____ _____
Full Name of Member Full Name of Member

Have Articles 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

Full Name of Treasurer

Full Name of Secretary

DIRECTORS AND TRUSTEES:

Full Name of Director/Trustee

Full Name of Director/Trustee

Full Name of Director/Trustee

Full Name of Director/Trustee

Note: If there are additional officers, directors or trustees, please specify using additional sheets if necessary.

NAME AND RESIDENCE ADDRESS OF EACH OFFICER OR MAJOR STOCKHOLDER:

Name

Address

City, State and Zip

Name

Address

City, State and Zip

Name

Address

City, State and Zip

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 Signature of Applicant

_____ _____
Name of Additional Applicant Signature of Additional Applicant

STATE OF _____

COUNTY OF _____

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20_____.

_____
Notary Public

(Seal)

_____
Commission Number

_____
My Commission Expires