

Roy B. Hooper
Administrator



Brad Henry
Governor

Scott Lesh
Deputy Administrator

Jari Askins
Lieutenant 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 obtaining a license from the Department of Consumer Credit must show lawful presence in the United States.

You must submit an affidavit if:

- You are licensed individually as a Mortgage Loan Originator (MLO) or a Precious Metals Employee (PME)
- Your company is licensed, but the business is *not* Incorporated or a Limited Liability Company

You do not need to submit an affidavit if your business is registered as a corporation or an LLC. Please note that only those businesses that are legally incorporated or registered as LLCs are exempt from this requirement.

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

All partners and owners of the company must complete and submit one of the appropriate affidavits. **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 or renew your license without the proper affidavit(s).**

Please do not call the Department with questions about the bill. (You are welcome to call us with questions about your application.) This is a requirement of the State of Oklahoma; our Department has no authority to address it. If you need further information, you may call the Oklahoma House of Representatives at 1-800-522-8502, or 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

MB

Form 1 - For U. S. Citizens

Affidavit of

[Name of Individual Applicant]

[Company Name]

STATE OF _____)

_____)

COUNTY OF _____)

_____, of lawful age, being first duly sworn,
[Printed Name of Individual Applicant]

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: _____

Commission Number: _____

My Commission Expires: _____

(Seal)

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

MB

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,

[Printed Name of Individual Applicant]

upon oath 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: _____

Commission Number: _____

My Commission Expires: _____

(Seal)

ADDITIONS AND CHANGES TO THE CURRENT MORTGAGE BROKER APPLICATION

THE FOLLOWING CHANGES BECOME EFFECTIVE JULY 1, 2003 FOR MORTGAGE BROKER APPLICANTS.

1. NEW APPLICANT MUST DESIGNATE AND MAINTAIN A PRINCIPAL PLACE OF BUSINESS IN OKLAHOMA FOR THE TRANSACTION OF BUSINESS.
2. THE APPLICATION MUST INCLUDE A LETTER DESIGNATING A RESPONSIBLE INDIVIDUAL, WHO SHALL BE A RESIDENT OF OKLAHOMA AND WHO IS AN EMPLOYEE WHO IS ACTIVE IN MANAGEMENT ACTIVITIES OF THE LICENSEE. THE DESIGNATED RESPONSIBLE INDIVIDUAL MUST MEET THE QUALIFICATIONS OF A LICENSED MORTGAGE BROKER.
3. ALL APPLICANTS MUST TAKE AND PASS A MORTGAGE BROKER TEST. THE FEE FOR THE TEST IS \$150.00 WHICH MUST BE INCLUDED AT TIME OF APPLICATION. THE STUDY GUIDE AND TEST TIMES ARE AVAILABLE ON OUR WEBSITE.
4. MORTGAGE LOAN ORIGINATORS ARE NOW REQUIRED TO BE LICENSED. MORTGAGE BROKER APPLICANTS WILL WANT TO INCLUDE APPLICATIONS AND FEES FOR EACH MORTGAGE LOAN ORIGINATOR. INFORMATION, APPLICATION AND TESTING REQUIREMENTS ARE AVAILABLE ON OUR WEBSITE.

THE FOLLOWING CHANGES BECOME EFFECTIVE JULY 1, 2004 FOR MORTGAGE BROKER APPLICANTS.

1. ALL LICENSES ISSUED UNDER THE MORTGAGE BROKER ACT SHALL BE VALID FOR A PERIOD OF ONE (1) YEAR.
2. INITIAL AND RENEWAL LICENSE FEES FOR A MORTGAGE BROKER LICENSE WILL BE \$100.00 (ONE HUNDRED DOLLARS) FOR EACH YEAR.
3. BRANCH OFFICE LICENSE FEES WILL BE \$50.00 (FIFTY DOLLARS) FOR EACH YEAR.
4. INDIVIDUAL AND RENEWAL LICENSE FEES FOR A LOAN ORIGINATOR LICENSE WILL BE \$50.00 (FIFTY DOLLARS) FOR EACH YEAR.

FOR CURRENT LICENSEES, THE ABOVE FEES WILL APPLY TO YOUR NEXT SCHEDULED RENEWAL DATE.

PLEASE CALL OUR OFFICE AT (405) 521-3653 IF YOU HAVE ANY QUESTIONS, OR CHECK OUR WEBSITE AT

<http://www.okdccc.state.ok.us>

LICENSE APPLICATION INSTRUCTIONS

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

Office of the Administrator
Oklahoma Department of Consumer Credit
4545 N. Lincoln Blvd., Suite 164
Oklahoma City, OK 73105-3408

All fees required must be submitted with the application. If incomplete, the application and fees will be returned, outlining missing requirements.

DO NOT RESUBMIT UNTIL COMPLETE. 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. Any application received without all required information, notaries and signatures will be returned for completion. *The reviewing process may take up to Thirty (30) Days from the receipt date of a complete application package.*

LICENSE REQUIREMENTS

(The forms listed below are included in this packet)

A COMPLETE APPLICATION PACKAGE FOR A MORTGAGE BROKER LICENSE IS COMPOSED OF:

- I. **APPLICATION: (pages 7-10)** 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. **PERSONAL AFFIDAVIT FORM: (pages 11-13)** These pages are personal information sheets on all officers and directors, and the top stockholders of a corporate applicant; by all members of a limited liability Applicant; by every partner of a partnership Applicant; and by the owner when Applicant is a sole proprietorship. **Be sure all forms are signed and notarized by each individual described in this paragraph.** Make additional copies if needed.
- III. **DESIGNATED AGENT FORM: (page 14)** This page is for appointing a resident or corporation of Oklahoma to accept service of process for your business. Be sure form is signed by the Applicant.
- IV. **FINANCIAL STATEMENT:** This statement must be recent (within 30 days) **This statement must be signed and dated by the owner, member or an officer of the company and notarized by a notary public.** If filing as a partnership, each partner must file a financial statement. Corporate applicants must file the most recent balance sheet.
- V. **BROKERAGE AGREEMENT:** A copy of the applicant's written correspondent or loan brokerage agreement with a lender. (59 O.S. Supp., Section 2086)
- VI. **TRUST ACCOUNT:** Satisfactory evidence from a federally insured financial institution in Oklahoma of the existence of a trust account in this state, in the applicant's name. Typical evidence will include a copy of the account application for the trust account. **If no funds are collected from the consumer up front, then you MUST include a letter with this application stating that you do not collect ANY funds from the consumer.**
- VII. **BUSINESS FORMS:** Copies of all business forms to be used in the business, including but not limited to the following:
 - A. Contracts to be executed with customers/borrowers;
 - B. Truth in Lending compliance forms;
 - C. HUD disclosure forms
- VIII. **STATE LICENSE INQUIRY FORM: (pages 15-16)** Must be completed and mailed to each state other than Oklahoma in which you are licensed or registered to do business as a Mortgage Broker or lender. (Note: Three (3) states are sufficient.)
- IX. **CERTIFICATE OF FICTITIOUS NAME: (pages 17-19)** **For Sole Proprietorships and General or Limited Partnerships:** If doing business using a fictitious name, a filed copy of the **Certificate of Fictitious Name** must be submitted for sole proprietorships and general partnerships. Contact the county clerk's office in which the business is to be located. Instructions on how to file enclosed.

X. ACOPY OF ALL BASIC DOCUMENTS ESTABLISHING THE ENTITY:

A. FOR 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 a **Certificate of Fictitious Name**.
3. A list of the names, addresses and telephone numbers of the partners and their degree of ownership.

B. FOR LIMITED PARTNERSHIPS:

1. A copy of all documents submitted to the Office of the Oklahoma Secretary of State. Such copies must show the date the documents were 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 and their degree of ownership.

C. FOR LIMITED LIABILITY COMPANIES:

1. A copy of the Articles of Organization and Certificate 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 the three largest shareholders, officers and directors of the LLC.

D. FOR DOMESTIC CORPORATIONS:

1. A copy of the Articles of Incorporation and Certificate 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 the three largest shareholders, officers and directors of the corporation.

E. FOR FOREIGN CORPORATIONS:

1. A certificate duly executed not more than THIRTY (30) DAYS prior to the filing of the application by the proper officer showing that the Applicant is authorized to transact business in the state of incorporation.
2. A designation of the corporation's principal agent in Oklahoma, giving both name and address.
3. A copy of the Articles of Incorporation.
4. A Certificate of Authority issued by the Oklahoma Secretary of State.
5. If your business falls under one of the exemptions on the Secretary of State instructions sheet, highlight the exemptions that apply and submit a copy with your application.
6. If doing business using a fictitious name, supply a copy of the Trade Name Report filed with the Secretary of State.
7. A list of the names, addresses and telephone numbers of the three largest shareholders, officers and directors of the Foreign Corporation.

For information concerning above items, contact:

**Oklahoma Secretary of State
101 State Capitol Building
Oklahoma City, OK 73105 (405) 521-3911**

- XI. STATUTORY FEE FOR INVESTIGATION AND LICENSE:** For new Mortgage Broker applications, the applicant shall pay **\$750.00 (SEVEN HUNDRED FIFTY DOLLARS)** application fee and **\$100.00 (ONE HUNDRED DOLLARS)** license fee and **\$150.00 (ONE HUNDRED FIFTY DOLLARS)** test fee for the first location license, for a total of **\$1,000.00 (ONE THOUSAND DOLLARS)**. For each **branch office**, the license fee shall be **\$50.00 (FIFTY DOLLARS)** for **each branch** location license.

XII. BRANCH LOCATION LICENSE REQUIREMENTS

BRANCH LICENSES: If you are applying for an additional location, you must complete:

- a) **The main Application (pages 7-10),**
- b) **Personal Affidavit form for only new officers, directors, trustees, members or partners (pages 11-13),**
- c) **Designated Agent form (page 14)**
- d) **A check or money order for \$50.00 (FIFTY DOLLARS) made out to the Department of Consumer Credit.**
- e) **A recent financial statement or balance sheet – signed, dated and notarized by the owner of the business or an officer, member or partner of the company in order to complete your application.**

LICENSE FEES AND RENEWAL REQUIREMENTS

When investigation, analysis, and approval of the application is complete, your license will be mailed to the designated address on the application for branch locations. In the case of a new license you will be contacted by a Department representative to schedule an appointment to pick up your license.

This license is to be prominently displayed in the licensed office so long as the licensee operates under the Oklahoma Mortgage Broker Act. In all correspondence or communication with this office subsequent to licensing, the licensee shall show the assigned number.

Mortgage Broker licenses are valid for one calendar year. The licensee is to submit a renewal fee of \$100.00 (ONE HUNDRED DOLLARS) prior to December 1st and in no instance later than FIFTEEN (15) DAYS after written notification from the Administrator that the renewal fee has not been received. Renewals received after December 31st will be returned and your license will subsequently be suspended. You may renew the suspended license by paying the renewal fee plus \$25.00 (TWENTY-FIVE DOLLARS) for each day after December 31st that a license renewal fee is not received. Licenses which are not renewed by February 1st of the new year shall expire.

Renewal of the license is the responsibility of each licensee. Notice of this renewal is mailed by the Department and records of delinquent filings become a permanent part of the license file.

The Administrator or his duly authorized representative may investigate the books, accounts, papers, correspondence and records of any licensee or other person holding a license, for the purpose of establishing compliance with the Rules of the Administrator.

RULES OF THE ADMINISTRATOR

Official copies of the Rules of the Administrator may be obtained by contacting the **Office of Administrative Rules** located at **220 Will Rogers Building** in **Oklahoma City**. Telephone number is **(405) 521-4911** and mailing address:

OFFICE OF ADMINISTRATIVE RULES
PO Box 53390
Oklahoma City, Oklahoma 73152

Copies are available at a cost of **25 cents per page**. When you request to purchase these Rules from the **Office of Administrative Rules**, the person will need to know that you need to purchase **Title 160, chapter (s) -**

<u>Chapter</u>	<u>Section</u>
1. Organization	160:1
3. Procedure	160:3
5. Fees (general information)	160:5
10. Consumer Leasing	160:10
15. Pawn Transactions	160:15
20. Changes in Dollar Amounts	160:20
25. Credit Features Exempted from Advance Notice of Changes in Terms	160:25
30. Credit Services Organizations	160:30
35. Oklahoma Rental Purchase Act	160:35
40. Garnishment Limitations	160:40
45. Truth in Lending	160:45
50. Health Spas	160:50
55. Mortgage Brokers	160:55
65. Supervised Lenders	160:65
70. Deferred Deposit Lenders	160:70

Unofficial rules may be downloaded at the Commission on Consumer Credit web address: <http://www.okdccc.state.ok.us>.

LICENSEE CHANGES (ADDRESS, ETC.)

Licenses issued under the Oklahoma Mortgage Broker 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.
Any application received that is not complete will be returned.

<u>TASKS TO BE COMPLETED:</u>		X
1.	APPLICATION - SIGNED AND NOTARIZED	
2.	PERSONAL AFFIDAVIT(S) - <u>BE SURE TO SIGN AND NOTARIZE</u>	
3.	APPOINTMENT OF DESIGNATED AGENT - BE SURE TO SIGN	
4.	FINANCIAL STATEMENT - <u>NOT MORE THAN THIRTY (30) DAYS OLD</u> <u>(SIGNED AND NOTARIZED)</u>	
5.	CERTIFICATE OF FICTITIOUS NAME (IF APPLICABLE) (COUNTY CLERK)	
	TRADE NAME REPORT (IF APPLICABLE) (SECRETARY OF STATE)	
6.	DOCUMENTS ESTABLISHING ENTITY:	
	PARTNERSHIP AGREEMENT (IF APPLICABLE)	
	DOMESTIC CORPORATION INFORMATION (IF APPLICABLE)	
	LIMITED LIABILITY INFORMATION (IF APPLICABLE)	
	FOREIGN CORPORATION INFORMATION (IF APPLICABLE)	
7.	IDENTITIES OF STOCKHOLDERS OR PARTNERS	
8.	COPIES OF FORMS TO BE USED	
9.	EVIDENCE OF TRUST ACCOUNT	
10.	\$750.00 APPLICATION FEE / \$100.00 LICENSE FEE PER FIRST LOCATION OFFICE PLUS \$150 TEST FEE = \$1,000.00	
11.	\$50 LICENSE FEE FOR EACH BRANCH OFFICE LOCATION	
12.	OTHER STATE'S LICENSE INQUIRY FORM (IF APPLICABLE)	
13.	BROKERAGE AGREEMENT	
14.	PROOF OF THREE (3) YEARS EMPLOYMENT FOR OFFICER OR OWNER TAKING TEST.	

PLEASE RETAIN INSTRUCTIONS FOR FUTURE REFERENCE

Please contact the Oklahoma Department of Commerce for information regarding additional licensing you may need at
 1 (800) 879-6552

<http://busdev3.odoc5.odoc.state.ok.us>

(Click on "Developing Your Business", then on the next page, the "Business Licensing Program" link)

(MORTGAGE BROKER LICENSE APPLICATION BEGINS ON NEXT PAGE)

APPLICATION FOR MORTGAGE BROKER 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 and the statutory fees as follows:

- A. \$750.00 (Seven Hundred Fifty Dollars) non-refundable Application fee, \$100.00 (ONE HUNDRED DOLLARS) for each license plus a \$150.00 (ONE HUNDRED FIFTY DOLLARS) Test Fee for each new Mortgage Broker, totaling \$1,000.00 (ONE THOUSAND DOLLARS) for each first location

THIS FORM MAY BE COMPLETED ONLINE AND PRINTED OUT, OR PRINTED THEN COMPLETED IN INK, OR USE TYPEWRITER.
ANSWER ALL QUESTIONS. STRIKE OUT ANY OPTIONAL WORDS WHICH DO NOT APPLY.
ATTACH ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER ALL QUESTIONS.

Pursuant to, and in accordance with the provisions of the OKLAHOMA MORTGAGE BROKER LICENSURE ACT, and for the purposes in said law set forth,

Name of Applicant/Business

E-Mail HTTP:// _____
Website

~I am (please check your applicable category)

____ A Person, ____ Association, ____ Joint Stock Company or Trust, ____ Co-Partnership, ____ Corporation, ____ or Limited Liability Company
(Attach evidence of sole proprietorship, corporate, partnership or L.L.C. status)

With his/her/its principal office and/or mailing address located at:

Number and Street of mailing address Telephone

City, State and Zip Fax

Hereby applies to the Administrator of the Department of Consumer Credit of the State of Oklahoma, for a Mortgage Broker License for the calendar year ending December 31, _____, at the following location;

Number and Street of business location Telephone

City, State and Zip Fax

~ The applicant has a written correspondent or loan brokerage agreement with:

(Attach a copy of the agreement)

~ 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)

~ The name and address of the manager for this location:

Name of Manager	Residential Address
City, State, and Zip	County
Telephone	E-Mail

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 THE THREE (3) LARGEST STOCKHOLDERS OWNING TEN (10%) PERCENT OR MORE:

1.

Name	Address
------	---------

City, State, Zip	Percentage of Ownership
------------------	-------------------------

2.

Name	Address
------	---------

City, State, Zip	Percentage of Ownership
------------------	-------------------------

3.

Name	Address
------	---------

City, State, Zip	Percentage of Ownership
------------------	-------------------------

THIS IS TO CERTIFY that neither I, nor any principal or business associate of mine have, to my knowledge after making inquiry, have been convicted by any court of competent jurisdiction of having violated any provision of the federal fair housing laws, 42 U.S.C. Section 3601 et seq., or of forgery, embezzlement, obtaining money under false pretenses, extortion, conspiracy to defraud, fraud, or any similar offense, civil or criminal; further, that neither I, nor any principal or business associate of mine, have performed the services of a mortgage broker without being duly licensed by the Department as required by law on or after November 1, 1997.

IN WITNESS WHEREOF, the applicant herein named has caused the foregoing application to be executed, this _____ day of _____, 20_____, and acknowledges that all statements made herein, 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 or Agent

ATTEST: Corporate Secretary

State of: _____

County of: _____

The person or persons whose signatures appear above personally appeared before the undersigned, a NOTARY PUBLIC, in and for the above named county and state, on the _____ day of _____, 20_____, and acknowledged the execution of the foregoing instrument to be the voluntary act and deed of the applicant therein named and for the purpose therein set forth, that they are duly authorized to execute the foregoing instrument, and that the statements and representations therein contained are true to the best of their knowledge and belief.

Notary



My Commission Expires

7. Occupational record during the last TEN (10) YEARS :

NOTE: All periods of time must be accounted for; periods of unemployment should be indicated and dates given. Provide date, name and address of employer, position held and nature of the duties performed

8. For the last three years' employment or business activity in the residential mortgage loan industry, or real estate sales or lending industry, provide evidence of said activity by copies of W-2's or 1099's.

9. Have you ever been directly or indirectly connected with an organization, in Oklahoma or elsewhere, which had its application for a license or registration refused by any federal, state or municipal authority? Yes _____ No _____ (If yes, furnish details. Attach extra sheets if necessary)

10. 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? Yes _____ No _____ (If yes, furnish details. Attach extra sheets if necessary)

11. Are there any civil criminal or administrative actions or proceedings pending against you at this time? Yes _____ No _____
(If yes, furnish details, including the jurisdiction and nature of the allegations. Attach extra sheets if necessary)

12. Have you ever been discharged for cause or have you ever been requested to resign from any position? Yes _____ No _____
(If yes, furnish details. Attach extra sheets if necessary)

Notarization

State of: _____

County of: _____

Before me, the undersigned authority, being duly sworn according to law, deposes and says that the statements contained herein are true and correct.

Signature of person completing this form

Notary

My Commission Expires

SEAL

STATE OF OKLAHOMA
DEPARTMENT OF CONSUMER CREDIT

APPOINTMENT OF DESIGNATED AGENT AND CONSENT TO SERVICE

TO BE COMPLETED BY ALL APPLICANTS

The undersigned _____ being
(Name of Applicant/Business)
an applicant for or holder of an **Oklahoma Mortgage Broker License** under the provisions of **Title 59 O.S., Chapter 47 Section 2085**, does hereby
appoint:

(Name in Full)

of _____
(Resident Address)

(City, State, Zip) _____ (Telephone)

a resident of the State of Oklahoma and County of _____
as agent upon whom may be served all judicial and other process or legal notice directed to this applicant; and in the case of the death, removal from
the state, or any legal disability or disqualification of such agent, service of all such judicial and other processes of legal notice may be made upon the
Administrator of the Department of Consumer Credit, State of Oklahoma.

IN WITNESS WHEREOF, the above named applicant has caused this instrument to be signed this _____ day of _____,
20_____.

NOTE: This consent must be signed by the proper officers, duly authorized by resolution of the Board of Directors and a copy of the said resolution
duly executed should be attached hereto.



Name of Applicant/Business

Signature of Applicant

Signature of Applicant - If needed

Signature of Applicant - If needed

Signature of Applicant - If needed

STATE LICENSE INQUIRY
INSTRUCTIONS TO APPLICANT

Please complete this page and the upper portion of the next page (the Request For Information form) and mail copies of these two pages to each state regulatory agency *other than Oklahoma* in which you are *already* licensed or registered to conduct a mortgage banker or mortgage broker business. Complete the upper half of this form by typing or printing the required information. Mail the form with the upper portion completed by you, to each state regulatory body. The recipients will then complete the rest of the Request For Information form concerning your licensing verification in their respective states and mail these forms back to this department so that we may complete your application file.

INCLUDE WITH THE FORM A POSTAGE PAID ENVELOPE ADDRESSED TO:

**Oklahoma Department of Consumer Credit
4545 North Lincoln Boulevard, Suite 164
Oklahoma City, OK 73105-3408**

Promptly mail this request to each state other than Oklahoma in which you are licensed or registered to do business as a mortgage lender. Approval of your application requires receipt of the information contained on this form from each state.*

****NOTE – NO MORE THAN 3 (THREE) COMPLETED STATE INQUIRIES ARE NEEDED FOR OUR RECORDS****

I hereby authorize _____ to release to the
(Name of State being contacted)

Oklahoma Department of Consumer Credit, any and all information requested.

(Name)

(Date)

(Title)

(Signature)

REQUEST FOR INFORMATION ON MORTGAGE LENDER APPLICANT

Name and Address of Applicant:

State _____ Date Licensed _____ Expiration Date _____

License Number _____ Type of License _____

The above named Mortgage Lender has made application for licensing to conduct business in the state of Oklahoma. The applicant has stated that they are licensed and regulated by you. As a part of our review of the applicant's qualification and suitability for a license, we are requesting that you provide us information on your experience with this applicant. Please complete the following and return to us in the envelope provided. Thank you.

Oklahoma Department of Consumer Credit
4545 North Lincoln Boulevard, Suite 164
Oklahoma City, OK 73105-3408

1. Is the information listed above accurate? _____
2. Did you conduct an investigation of this applicant prior to issuing a license? _____
3. Have you received any complaints against this applicant? _____
4. Have you conducted an examination or audit of their operation? _____
5. If the answer to question 4 is yes, please provide the date of the last examination and briefly describe the results.
6. Have you taken action against this licensee for violations of your state's laws? _____
7. If the answer to question 6 is yes, please attach a copy or briefly describe the circumstances and resolution.
8. Does your state have a website that would give us this information online?

Form completed by: _____ Position: _____ Date: _____

INSTRUCTIONS ON HOW TO FILE A CERTIFICATE OF FICTITIOUS NAME

1. A Certificate of Fictitious Name is a name used for a business when any name except the name of the owner is used; i.e. John Doe doing business as Ace Credit Services.
2. To form a corporation, contact the Oklahoma Secretary of State at (405) 521-3911.
3. To form a limited partnership, contact the Oklahoma Secretary of State.
4. To form a limited liability company, contact the Oklahoma Secretary of State.
5. When you have chosen the name you want to use for your business, contact your county clerk's office to be sure the name is not already in use.
6. Contact the Oklahoma Secretary of State to make sure the name you choose is not already being used as a corporate, limited partnership or limited liability name.
7. There is no form for a Certificate of Fictitious Name. Draw up your own using the enclosed guideline as an example.
8. Be sure to have your signature(s) notarized.
9. Be sure to show your return address on the face of your certificate.
10. Publication is optional for sole proprietors.
11. Limited partnerships are not required to publish, but must be on file with the Secretary of State.
12. General Partnerships: Take a copy of your certificate to any newspaper in the county in which you file and have it published for one day. Obtain a publishers Affidavit and attach it to your original certificate.
13. A Certificate of Fictitious name is to be filed in the county in which the principal place of business is located.
14. Check with your county clerks for filing fee.

GUIDE FOR TYPING YOUR CERTIFICATE OF FICTITIOUS NAME
SOLE OWNERSHIP

NOTE: This is a guide, not a form to fill in the spaces. Type your own certificate giving all required information. If necessary, you may change the wording to fit your needs.

Certificate of Fictitious Name of
(Name you have chosen)

KNOW ALL MEN BY THESE PRESENT:

That (your name and address), is the sole owner and operator of (type of business), under the firm name of (name of business), and that said business is a sole ownership, dating from the _____ day of _____, 20_____; and that there are no other members belonging to the sole ownership.

Dated this _____ day of _____, 20_____.

Signature of Owner

State of: _____

County of: _____

Before me, the undersigned authority, being duly sworn according to law, deposes and says that the statements contained herein are true and correct.

Notary

SEAL

My Commission Expires

Return to: Your name
 Your return address
 Your city, state and zip

GUIDE FOR TYPING YOUR CERTIFICATE OF FICTITIOUS NAME
GENERAL PARTNERSHIP

NOTE: This is a guide, not a form to fill in the spaces. Type your own certificate giving all required information. If necessary, you may change the wording to fit your needs. (For instance, if a partner does not live in Oklahoma County, give county where each lives).

Certificate of Fictitious Name of
(Name you have chosen)

KNOW ALL MEN BY THESE PRESENT:

That the following named persons are associated as partners in the business of ownership and management of (type of business), under the firm name of (name of business). That said partnership is a general or limited partnership, dating from the _____ day of _____, 20_____. That the principals' place of business for this partnership is (give complete address including name of one person or service at that location).

General Partners

Residence Address

1. _____

2. _____

Limited Partners

Residence Address

1. _____

2. _____

Signature of Partner

Signature of Partner

State of: _____

County of: _____

Before me, the undersigned authority, being duly sworn according to law, deposes and says that the statements contained herein are true and correct.

Notary

SEAL

My Commission Expires

OKLAHOMA DEPARTMENT OF CONSUMER CREDIT
EXAMINATION & RECORD KEEPING INFORMATION

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 Oklahoma Secure and Fair Enforcement for Mortgage Licensing Act Section 2095 of Title 59, Chapter 25; and Oklahoma Administrative Code Title 160, Chapter 55, 160:55-7-1. **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 _____ Lic. # _____

Main Office Address _____

City/Town _____ State _____ Zip _____

Contact Person for questions on this Request _____

Telephone (____) _____

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

Address _____

City/Town _____ State _____ 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 other forms other than hardcopy and will provide equipment necessary to access records for the purpose of 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

Applicant/Licensee requests approval to maintain books, accounts and records outside Oklahoma. In order to facilitate a full examination of this license _____
_____ hereby agrees to pay the expenses of the Oklahoma Administrator's representative(s) in conducting an examination or your books and records pertaining to loans made in Oklahoma.

The Department expects the Applicant/Licensee to pay the additional expenses for examiner's air/train fares, hotel accommodations, motor vehicle rentals, private motor vehicle mileage, as well as per diem compensation for any compensatory time required to be paid an examiner.

The above expenses are understood to be in addition to the Three Hundred Dollars (\$300.00) minimum examination fee.

It is further understood that this agreement is being made so that _____
_____ may keep obligations signed by borrowers at an office outside the State of Oklahoma.

Contact Person at Location _____

Address _____

City/Town _____ State _____ Zip _____

Office Hours _____

Describe space available for examination _____

CERTIFICATION

I, _____, a duly authorized officer of
(Name and Title)

(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.

(Date)

(Signature)