

STATE OF DELAWARE
OFFICE OF THE STATE BANK COMMISSIONER
555 E. LOOCKERMAN STREET, SUITE 210
DOVER, DELAWARE 19901

**RENEWAL APPLICATION
FOR LICENSE UNDER CHAPTER 22
LICENSED LENDERS**

Website Address: _____

1. Name of Applicant: _____
E.I. or S.S. No: _____

2. Contact person and phone number for application:

Name/Title	Telephone Number/Extension	Fax No.	Email Address
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3. Address of principal office where Delaware business is being conducted: **The renewal application cannot be used to notify this office of address changes or to apply for new branch offices.** Please contact this office for instructions on the proper procedure for address changes/applying for new offices.

No. & Street	City	State	Zip Code
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(Must be consistent with current address on record.)

Additional licensed locations being renewed (Must be consistent with current addresses on record.):

No. & Street	City	State	Zip Code
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No. & Street	City	State	Zip Code
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No. & Street	City	State	Zip Code
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No. & Street	City	State	Zip Code
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If additional space is required, attach list.

4. All applicants must provide information regarding their registered agent for service of process in Delaware.
- (a) Businesses organized in Delaware may designate the business itself, an individual resident in this State or another business authorized to transact business in this State provided the designee is located in Delaware in accordance with Section 132(a), Title 8 of the Delaware Code.
 - (b) Businesses organized in locations other than Delaware may designate an individual resident in this State or another business authorized to transact business in this State provided the designee is located in Delaware in accordance with Section 371(b)(2), Title 8 of the Delaware Code.

Name, Street Address, and Telephone Number of Registered Agent:

5. Applicant business is formed as a: ___Corporation ___Partnership ___Sole Proprietorship ___LLC ___
Other (name type) _____ State Formed In: _____
6. Please provide an updated list of Principals (officers, directors, partners, members, owner, senior management etc.) of the business including full name, title, residential address, business address, date of birth, and, if a director, the date term expires, with this renewal application.
7. Please provide an updated list of all individuals and businesses with an ownership interest in the licensee, including full name, residential address, business address, and number of shares held or percentage of ownership with this renewal application. If licensee is a subsidiary of a parent company, provide the entire ownership chain up to the ultimate owner (individual or publicly traded company).
8. (a) Personal resumes and personal financial statements for all **new** principals of the business must be submitted with this renewal application. Personal resumes should include a detailed work history. Personal financial statements must be in the form of a balanced asset/liability statement. **Tax forms, credit bureau histories, and statements of net worth will not be accepted.**
- (b) Please provide an updated list of managers of all locations to be licensed. Provide the resume of any location manager hired or promoted after last year's renewal was submitted (or during 2016). Personal resumes should include a detailed work history.
9. (a) A recent asset/liability statement (balance sheet – **must reflect adequate capital**) and income statement (profit/loss sheet) of the applicant company must be submitted with this renewal application. **PLEASE NOTE:** Owners of sole proprietorships must also provide a detailed personal financial statement.
- (b) What is your maximum loan amount? _____
10. If applicant's capital stock is owned, in whole or in part, by a parent company, then a statement of financial condition must be submitted for the parent company.
11. Please submit a detailed business plan. Include how you intend to market to Delaware consumers.

12. **SURETY BOND AND/OR LETTER OF CREDIT**

Please indicate which of the following applies:

- ____ a) Attached is a copy of our continuous surety bond.
- ____ b) Attached is an original continuation certificate extending the validity of our surety bond through and including December 31, 2018(or later).

- _____c) Attached is an original amendment to our irrevocable letter of credit extending the validity of the LOC through and including December 31, 2020 (or later).
- _____d) Attached is a copy of our irrevocable letter of credit, which is already valid through and including December 31, 2020 (or Later).
- _____e) Attached is a brand new, original surety bond valid through and including December 31, 2018 **OR** a brand new, original irrevocable Letter of Credit valid through and including December 31, 2020.

13. Have you or any owner, officer, director, partner, member, employee or agent of your organization been convicted of a criminal offense **since the last time this information was disclosed? Include past incidents that have only recently come to your attention, such as information about new employees.** Yes _____ No _____
14. Have you or any owner, officer, director, partner, member, employee or agent of your organization ever used an alias or been known by any other name (other than “maiden/married”) **since the last time this information was disclosed?** Yes _____ No _____
15. Has the applicant company, you or any owner, officer, director, partner, member, employee or agent of your organization ever had any license (other than driver’s license) suspended, revoked, or denied or has any regulator imposed a fine or taken other type of disciplinary action **since the last time this information was disclosed as part of an application process?** Yes _____ No _____
16. If the answer to questions 13, 14, or 15 is “yes”, please attach a separate page giving details. If the answer to 13 **and/or** 15 is yes, please provide photocopies of all legal and/or regulatory documents that pertain to the matter (i.e., Consent Agreement, Cease and Desist Order, Revocation Order, Reinstatement Order, Court documents, etc.)
17. a) The filing of all reports, such as Report of DE Assets and Report of DE Loan Volume, must be up to date. Licensees behind on filing will not be considered approved until the missing reports are received by this office.
- b) Please note that all outstanding invoices must be paid before a renewal application will be considered for approval.
- c) **If you have been examined by this office and received a report listing violations, please note that you must respond to this office and clear the violations before a renewal application will be considered for approval.**
18. Application Submission Information.
- An annual license renewal fee of \$250.00 per location must be submitted with this renewal application.
 - **Short Term Consumer and Title lenders, please remit the \$1,500.00 per location surcharge.**
 - Please make checks payable to *State of Delaware* and reference it to “Renewal Fee”.
 - **Applications received on or before the December 1, 2017 deadline, but without all required fees, will be considered late and treated accordingly.**
 - **If you are not renewing a particular licensed location, you must state this in writing on your letterhead.**

Name of Applicant: _____

19. Address where loan files and other records will be kept for examination purposes:

20. Address where actual examination will be conducted:

I hereby certify that I am authorized to sign and submit this application for licensure on behalf of the applicant company, in my role as principal of said company, and that the information contained herein is true and correct to the best of my knowledge and belief

Full Corporate Name

Corporate Seal

* ____ Check here if you do not have a corporate seal

***If company has had a seal in the past and no longer has one, please attach an explanation.**

Signed: _____

Principal

Sworn to and subscribed before me this _____ day of _____, 2____.

Signature of Notary Public

My Commission expires on _____.

NOTARY SEAL

LICENSED LENDERS

Name of Licensee: _____

EMPLOYER IDENTIFICATION NUMBER: _____

A contact and all requested information must be provided for each of the following categories:

Supervisory Assessment

Name and Title	Telephone #	Extension #
Email Address	Fax #	
Mailing Address		

License Renewal

Name and Title	Telephone #	Extension #
Email Address	Fax #	
Mailing Address		

Examination

Name and Title	Telephone #	Extension #
Email Address	Fax #	
Mailing Address		

Complaints

Name and Title	Telephone #	Extension #
Email Address	Fax #	
Mailing Address		

Public Contact

Name and Title	Telephone #	Extension #
Email Address	Fax #	
Mailing Address		

MLO License Renewal

Name and Title	Telephone #	Extension #
Email Address	Fax #	
Mailing Address		

Changes in the above contacts must be reported to our office immediately.

BUSINESS SURVEY

Licensee: _____

Please indicate the types of lending in which your company engages under your Delaware Licensed Lenders license:
(check all that apply and return with your completed renewal application)

- Purchase Money Mortgages up to 80%
- Purchase Money Mortgages up to 100%
- Piggyback/Purchase Money (closed simultaneously)
- Construction/Permanent
- Mortgage Refinance Loans up to 80%
- Mortgage Refinance Loans more than 80% but not more than 100%
- Mortgage Refinance Loans up to 125%
- Equity Loans (closed end) up to 80%
- Equity Loans (closed end) up to 100%
- Equity Loans (closed end) up to 125%
- Equity Loans (open end) up to 80%
- Equity Loans (open end) up to 100%
- Equity Loans (open end) up to 125%
- Refund Anticipation Loans
- Reverse Mortgages
- HOEPA Loans
- Negative Amortization Loans (if more than 1 product describe below)
- Short Term consumer Loans (\$1000 or less; repayment period of less than 60 days)
- Unsecured Consumer Loans (repayment period of more than 60 days)
- Secured Consumer Loans (repayment period more than 60 days; not secured by real property or motor vehicle)
- Consumer Loan, secured by motor vehicle title (repayment terms of 181 days or more)
- Title Loans
- Loans for the purchase of a motor vehicle (not on retail sales contracts)
- Purchase of distressed closed loans (no origination or refinancing)

Subprime

List your subprime products, if not listed above. If listed above, place an asterisk beside each of your subprime products.

Contact Name, Title, Phone Number and Date