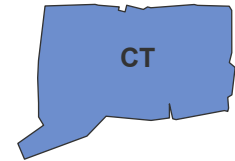




**Amendments**  
Jurisdiction-Specific Requirements



**CONNECTICUT MORTGAGE LENDER LICENSE**

**Instructions**

**Pre-Notification:**

1. The following changes to Form MU1 require prior notification and must be sent outside NMLS to this agency at least 30 days prior to the change being made in NMLS (please follow the instructions found on page 2 of this document regarding each change).
  - Change of name
  - Change or adoption of D/B/A name
  - Change of main office address

All other changes or amendments shall be filed promptly through NMLS. The documentation to support the other listed changes is required to be submitted to the agency within 5 business days of submission of your amendment filing through NMLS.

2. To amend your MU1 or MU2 Form in NMLS, enter the Filing Tab, the appropriate MU Form, create a new filing and enter the section of the form that requires amendment, make the appropriate changes, proceed to the “complete and submit” field and attest to all changes.
3. Connecticut does not charge fees for amendments.
4. All fees collected through the NMLS ARE NOT REFUNDABLE.
5. Any change in Control Persons must also be reported on Form MU2.
6. Supporting documentation as noted in the checklist must be provided along with this checklist to the following:

*Connecticut Department of Banking  
Consumer Credit Division  
260 Constitution Plaza  
Hartford, CT 06103*

NMLS Unique ID Number: \_\_\_\_\_

Applicant Legal Name: \_\_\_\_\_

ATTACHED	NOT APPLICABLE	ITEM
<input type="checkbox"/>	<input type="checkbox"/>	<b>CHANGE OF NAME.</b> 1) Submit a surety bond rider; 2) if a corporation, submit the amended Corporate Charter or amended Articles of Incorporation; if a Limited Liability Company, the amended Articles of Organization and Operating Agreement; and, if a partnership of any form, the amended Partnership Agreement; 3) submit an amended Certificate of Authority or Certificate of Good Standing issued from the Connecticut Secretary of the State. The effective date of the rider should reflect the actual date of the name change.
<input type="checkbox"/>	<input type="checkbox"/>	<b>CHANGE OR ADOPTION OF D/B/A.</b> Submit a surety bond rider. The effective date of the rider should reflect the actual date of the name change.
<input type="checkbox"/>	<input type="checkbox"/>	<b>CHANGE OF MAIN OFFICE ADDRESS.</b> Submit a surety bond rider. The effective date of the rider should reflect the actual date of the move.
<input type="checkbox"/>	<input type="checkbox"/>	<b>CHANGE OF QUALIFYING INDIVIDUAL.</b> Submit a resume or <a href="#">work experience</a> form for the newly listed qualifying individual. The resume (or form) should detail the individuals work experience for the past five years (at minimum). Dates of employment (month and year) should be recognized.
<input type="checkbox"/>	<input type="checkbox"/>	<b>CHANGE IN SURETY BOND PROVIDER.</b> Submit an original, fully executed surety bond with original attachments from the new surety.
<input type="checkbox"/>	<input type="checkbox"/>	<b>CHANGE IN OTHER TERMS OF THE BOND.</b> Submit a bond rider recognizing the change in terms of the bond. <a href="#">Mortgage Licensee Surety Bond Calculation and Instructions</a>
<input type="checkbox"/>	<input type="checkbox"/>	<b>CHANGE IN RESPONSE TO DISCLOSURE QUESTIONS.</b> Provide complete details, in writing, of all events or proceedings for each answer amended to “Yes” in response to the Disclosure Questions for the Company, or its control persons, on Forms MU1 and MU2. Copies of applicable official documentation should be included. For situations in which a disclosure question response is being amended from “Yes” to “No”, a brief explanation for the amendment should be submitted as well.

**NOTE:** Excluding a newly executed surety bond, all supporting documentation can be emailed to the licensing staff listed below.

**WHO TO CONTACT** – Contact Consumer Credit Division licensing staff:

- Joseph Wallace at 860-240-8210 or [joseph.wallace@ct.gov](mailto:joseph.wallace@ct.gov) or
- Beata Zuber at 860-240-8278 or [beata.zuber@ct.gov](mailto:beata.zuber@ct.gov)

THE APPLICANT/LICENSEE IS FULLY RESPONSIBLE FOR ALL OF THE REQUIREMENTS OF THE LICENSE FOR WHICH THEY ARE AMENDING. THE JURISDICTION SPECIFIC REQUIREMENTS CONTAINED HEREIN ARE FOR GUIDANCE ONLY TO FACILITATE AMENDMENT REQUEST THROUGH THE NMLS. SHOULD YOU HAVE QUESTIONS, PLEASE CONSULT LEGAL COUNSEL.