



**Amendments**  
Jurisdiction-Specific Requirements



**IOWA MASTER LOAN COMPANY LICENSE**

**Instructions**

1. The following amendment require instructions or items sent outside the NMLS:
2. Amendment fees are:     Change of Address - \$25 branch certificate  
                                    Change of Name - \$25 per license  
                                    Change of Ownership – \$100 paid directly to Iowa Division of Banking
- (Check all of the above that apply)**
3. All fees are collected through the NMLS and ARE NOT REFUNDABLE.
4. Any Change of Address, Change of Name or change in Control Person or Manager (Control person) must also be reported on the applicable Form MU1 and Form MU2.
5. Jurisdiction-specific requirements should be completed first as identified on the checklist below as they must be received with this checklist within 5 business days of the electronic submission of your application through the NMLS at the following:

*For U.S. Postal Service/Overnight Delivery*

*Iowa Division of Banking  
200 East Grand Avenue  
Suite 300  
Des Moines, IA 50309-1827*

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

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

ATTACHED	NOT APPLICABLE	ITEM
<input type="checkbox"/>	<input type="checkbox"/>	<b>SURETY BOND RIDER. (For change of address or change of name only) -</b> Submit the Surety Bond Rider that reflects the change of address or change of name, whichever is applicable.
<input type="checkbox"/>	<input type="checkbox"/>	<b>ORIGINAL LICENSE. (For change of address or change of name only) -</b> Return the original license as issued by the Iowa Division of Banking.

<input type="checkbox"/>	<input type="checkbox"/>	<p><b>SECRETARY OF STATE/MUNCIPALITY DOCUMENTATION. (For all amendments) -</b></p> <ul style="list-style-type: none"> <li>a. If a corporation, provide a Certificate of Good Standing dated not more than sixty (60) days from the filing of this application <b>issued by the Iowa Secretary of State.</b></li> <li>b. If a limited liability company, provide a copy of a Certificate of Good Standing or a Certificate of Registration dated not more than sixty (60) days from the filing of this application <b>issued by the Iowa Secretary of State.</b></li> <li>c. If a limited partnerships provide a Certificate of Good Standing for the Limited Partnership from the Iowa Secretary of State.</li> <li>d. If a general partnerships provide a Certificate of Good Standing for the General Partnership from the <b>City or Town</b> in which the partnership is registered.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>CHANGE IN OWNERSHIP LEGAL DOCUMENTS –</b> Provide certified copies of all legal documents executed and associated with the change in ownership, including any applicable purchase and sales agreements, merger agreements, or consent to change in ownership agreements.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>FORM MU2 FOR ANY CHANGE IN CONTROL PERSON OR MANAGER.</b> A change in any Control person or a change in any person designated as a manager of a licensed office must be reported as an Amendment on the <b>Form MU1</b> filing with a new <b>Form MU2</b> submitted through the NMLS.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>DISCLOSURE QUESTIONS.</b> Provide complete details of all events or proceedings for any “Yes” answer to any of the Disclosure questions for company or any new Control Person or any new Manager.</p>

**WHO TO CONTACT –** Contact the Iowa Division of Banking Finance Bureau Licensing staff by phone at 515-281-4014 or send your questions via e-mail to [fblicensing@idob.state.ia.us](mailto:fblicensing@idob.state.ia.us) for additional assistance.

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