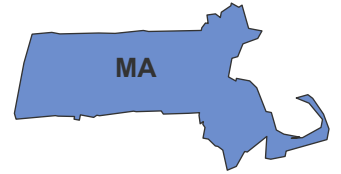




## Amendments Jurisdiction-Specific Requirements



# MASSACHUSETTS THIRD PARTY LOAN SERVICER REGISTRATION

## Instructions

1. The following amendments require items to be sent to Massachusetts outside the NMLS:
  - Legal Name change
  - Main Address change
  - Other Business Name change
2. Amendment Fees:
  - The main address amendment fee is \$200.
3. All fees are collected through the NMLS and ARE NOT REFUNDABLE.
4. Jurisdiction-specific requirements as identified on the checklist below must be received with this checklist within 5 business days of the electronic submission of your amendment filing through the NMLS at the following:

*Massachusetts Division of Banks  
Attn: Consumer Finance Licensing Unit  
1000 Washington Street  
10th floor  
Boston, MA 02118-2218*

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

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

ATTACHED	NOT APPLICABLE	ITEM
<b>NAME CHANGE REQUIREMENTS:</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<b>Amend name in the “Entity Name” field of the “Identifying Information” section of Form MU1.</b> Please be advised that the name change may trigger a corresponding amendment requirement in the “Legal Status” section of Form MU1.
<input type="checkbox"/>	<input type="checkbox"/>	<b>ORIGINAL REGISTRATION.</b> Return the original registration certificate to the Division of Banks. A new registration will be printed and mailed to you.
<input type="checkbox"/>	<input type="checkbox"/>	<b>SECRETARY OF STATE DOCUMENTATION.</b> Provide all relevant name change documentation from the Secretary of State(s) office(s) to verify the registrant’s legal name has been properly amended with its home state and with the Secretary of the Commonwealth. Based on review of the notification, additional documents may be required.
<input type="checkbox"/>	<input type="checkbox"/>	<b>W-9.</b> Complete the W-9. <a href="#">Click to download form</a>
<b>MAIN ADDRESS AMENDMENT REQUIREMENTS:</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<b>Amend company address in the “Main Address” field of the “Identifying Information” section of Form MU1.</b> The change will trigger a \$200.00 change of address fee. Please be advised that you are required to amend any other address fields on Form MU1 that have also changed, however no fee will be charged for those amendments.
<input type="checkbox"/>	<input type="checkbox"/>	<b>ORIGINAL REGISTRATION.</b> Return the original registration certificate to the Division of Banks. A new registration will be printed and mailed to you.
<b>OTHER BUSINESS NAME CHANGE REQUIREMENTS:</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<b>Amend trade or fictitious name in the “Other Business Names” section of Form MU1.</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>ORIGINAL REGISTRATION.</b> Return the original registration certificate to the Division of Banks. A new registration will be printed and mailed to you.

**WHO TO CONTACT** – Contact Division of Banks licensing staff by phone at 617-956-1500 ext. 554 or send your questions via e-mail to [nmls@state.ma.us](mailto:nmls@state.ma.us) for additional assistance.

REGISTRANTS ARE RESPONSIBLE FOR ALL OF THE REQUIREMENTS OF THE REGISTRATION. THE JURISDICTION SPECIFIC REQUIREMENTS CONTAINED HEREIN ARE FOR GUIDANCE ONLY TO FACILITATE APPLICATION THROUGH THE NMLS. SHOULD YOU HAVE QUESTIONS, PLEASE CONSULT LEGAL COUNSEL.