



**Amendments**  
Jurisdiction-Specific Requirements



**RHODE ISLAND LENDER BRANCH CERTIFICATE**

**Instructions**

- The following amendments require instructions or items sent outside the NMLS:
- Amendment fees are:
  - Change of Address - \$250 per license or branch certificate
  - Change of Name - \$50 per branch certificate

**(Check all of the above that apply)**
- All fees are collected through the NMLS and ARE NOT REFUNDABLE.
- Any Change of Address or change of Name must also be reported on the applicable Form MU3.
- 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*

State of Rhode Island  
Department of Business Regulation  
Division of Banking  
1511 Pontiac Avenue, Bldg. 68-2  
Cranston, Rhode Island 02920

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

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

Rhode Island License Number: \_\_\_\_\_

Effective Date of Amendment(s): \_\_\_\_\_

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 BRANCH CERTIFICATE. (for change of address or change of name only)</b> - Return the original license as issued by the Department of Business Regulation.
<input type="checkbox"/>	<input type="checkbox"/>	<b>FINANCIAL STATEMENT(S). (For all amendments)</b> - Provide a Statement of Financial Condition (Balance Sheet) signed by an executive officer prepared in accordance with Generally Accepted Accounting Principles and dated <u>not more than sixty (60) days</u> prior to the application date showing assets, liabilities and net worth <u>or</u>

		upload them onto NMLS as “Year-to-date” Financial Statements.
<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 Rhode Island 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 Rhode Island Secretary of State.</b></li> <li>c. If a limited partnerships provide a Certificate of Good Standing for the Limited Partnership from the <b>Rhode Island Secretary of State.</b></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>FINANCIAL STATEMENT OF MANAGER.</b> Provide a Personal Financial Statement prepared in accordance with Generally Accepted Accounting Principles dated within 90 days of the date of application for each new Manager of a branch office.</p> <p><a href="#">Click here to download form.</a></p>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>IDENTIFICATION. (For a new manager only) -</b> Provide a copy of a valid Photo ID for any new branch manager.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>FORM MU2 FOR ANY CHANGE IN MANAGER.</b> A change in any person designated as a manager of a branch office must be reported as an Amendment on the <b>Form MU3</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 the company or any new Control Person or any new Manager.</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>AUTHORIZATION FOR BACKGROUND CHECK AND RELEASE.</b> Provide an executed original copy of the release form for each new Control person designated as a manager of a branch office. <a href="#">Click here to download form.</a></p>
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>FD258 FINGERPRINT CARDS.</b></p> <p><b>FD258 FINGERPRINT CARDS AND CERTIFICATION OF FINGERPRINTING FORMS.</b> For each new person designated as a manager of a branch office they must provide <b>(1)</b> two (2) Fingerprint Cards <b>(2)</b> a check in the amount of <b>\$35.00</b> made out to <b>BCI</b>, for the fingerprint-processing fee. (contact your local FBI office, local Attorney General Office, or local Police Office for fingerprint cards). <b>(3)</b> the agency fingerprinting individual must complete the Certification of Fingerprinting form.</p> <p><a href="#">Click here to download form</a></p> <p><b>(4)</b> Persons residing in the State of Rhode Island <b>must go directly to the Rhode Island Department of Attorney General</b> for fingerprinting (in this case submission of the fingerprint cards to the Division in not required) along with a check or money order payable to <b>BCI</b> in the amount of <b>\$35</b> for the fingerprint-processing fee.</p>

**WHO TO CONTACT** – Contact Division of Banking licensing staff by phone at 401-462-9503 or send your questions via e-mail to [bankinquiry@dbr.state.ri.us](mailto:bankinquiry@dbr.state.ri.us) for additional assistance.

YOU ARE NOT AUTHORIZED TO ENGAGE IN MORTGAGE BROKERING OR MORTGAGE LENDING ACTIVITIES IN THE STATE OF RHODE ISLAND UNTIL YOU HAVE RECEIVED APPROVAL THROUGH THE NMLS.AND HAVE RECEIVED A LICENSE CERTIFICATE FROM THE RHODE ISLAND DEPARTMENT OF BUSINESS REGULATION