



NMLS BRANCH FORM

The NMLS Branch Form is the universal licensing form used by companies to apply for and maintain branch license(s) for any non-depository, financial services license authority if required by a state agency participating on NMLS. In accordance with state law, applicants may be required to have certain persons (i.e. Branch Managers) complete an NMLS Individual Form to be submitted along with the NMLS Branch Form.

*** ALL FORMS ARE COMPLETED ELECTRONICALLY THROUGH [NMLS](#) – THIS FORM IS FOR INSTRUCTIONAL PURPOSES ONLY ***

1. Business Activities

Select **all** business activities conducted by your company from the list below, including business activities for which a license request is being submitted or for which your company is not specifically seeking licensing authority.

Mortgage	Consumer Finance	Debt	Money Services
<input type="checkbox"/> First mortgage brokering	<input type="checkbox"/> Payday lending - storefront	<input type="checkbox"/> First party debt collection	<input type="checkbox"/> Electronic money transmission
<input type="checkbox"/> Second mortgage brokering	<input type="checkbox"/> Payday lending - online	<input type="checkbox"/> Third party debt collection	<input type="checkbox"/> Issuing traveler's checks
<input type="checkbox"/> First mortgage lending	<input type="checkbox"/> Consumer loan brokering	<input type="checkbox"/> Debt negotiation	<input type="checkbox"/> Selling traveler's checks
<input type="checkbox"/> Second mortgage lending	<input type="checkbox"/> Consumer loan lending	<input type="checkbox"/> Debt settlement/debt adjuster	<input type="checkbox"/> Issuing money orders
<input type="checkbox"/> First mortgage servicing	<input type="checkbox"/> Consumer loan servicing	<input type="checkbox"/> Passive debt buying (does not undertake direct collections on accounts)	<input type="checkbox"/> Selling money orders
<input type="checkbox"/> Third party first mortgage servicing	<input type="checkbox"/> Sales finance company activities – motor vehicles	<input type="checkbox"/> Active debt buying (undertakes direct collections on accounts)	<input type="checkbox"/> Bill paying
<input type="checkbox"/> Subordinate lien mortgage servicing	<input type="checkbox"/> Sales finance company activities – general	<input type="checkbox"/> Debt management/credit counseling	<input type="checkbox"/> Issuing and/or selling drafts
<input type="checkbox"/> Third party subordinate lien mortgage servicing	<input type="checkbox"/> Title lending	<input type="checkbox"/> Credit repair	<input type="checkbox"/> Transporting currency
<input type="checkbox"/> Mortgage loan purchasing	<input type="checkbox"/> Refund anticipation lending	<input type="checkbox"/> Judgment recovery	<input type="checkbox"/> Issuing prepaid access/stored value
<input type="checkbox"/> Short sale	<input type="checkbox"/> Premium finance company activities	<input type="checkbox"/> Repossession agency activities	<input type="checkbox"/> Selling prepaid access/stored value
<input type="checkbox"/> Foreclosure consulting/foreclosure rescue	<input type="checkbox"/> Retail installment selling	<input type="checkbox"/> Repossession agent activities	<input type="checkbox"/> Check cashing
<input type="checkbox"/> Home equity lending/lines of credit	<input type="checkbox"/> Escrowing agents	<input type="checkbox"/> Non-mortgage loan modifications	<input type="checkbox"/> Foreign currency dealing or exchanging
<input type="checkbox"/> Reverse mortgage originations	<input type="checkbox"/> 1031 exchange companies	<input type="checkbox"/> Bi-weekly payment processing services	
<input type="checkbox"/> High cost home loans	<input type="checkbox"/> Private student loan lending		
<input type="checkbox"/> Credit insurance services	<input type="checkbox"/> Non-private student loan lending		
<input type="checkbox"/> Third party mortgage loan processing	<input type="checkbox"/> Rent-to-own		
<input type="checkbox"/> Third party mortgage loan underwriting	<input type="checkbox"/> Accounting/Billing servicing		
<input type="checkbox"/> Manufactured housing financing	<input type="checkbox"/> Industrial loan lending companies		
<input type="checkbox"/> Lead generation	<input type="checkbox"/> Pawn brokering		
<input type="checkbox"/> Commercial mortgage brokering or lending			
<input type="checkbox"/> Mortgage loan modifications			

2. Identifying Information

Branch address, mailing address, if different, and branch office's telephone numbers:

(A) Main address (Do not use a PO Box):

Number & Street City State Country/Province Postal Code

(B) Mailing address: Same as above

PO Box or Number & Street City State Country/Province Postal Code

(C) Business phone, fax and email address:
() - ext () -
Business Phone Fax Line Email Address

3. Other Trade Names

All Other Trade Name used at this branch location (i.e. trade name, fictitious name, or "doing business as") must be identified below. Use additional sheets as necessary.

NOTE: Review state licensing requirements for rules and restrictions regarding other trade names. All other trade names identified below must also be added to your company record (NMLS Company Form).

Other Trade Names or "dba" used at this branch State(s) where the Other Trade Name is used Identify applicable industry:
 Mortgage; Debt; Consumer Finance;
 Money Services

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4. Branch Manager

A Branch Manager is required for each Branch Location. The Branch Manager will be required to complete the NMLS Individual Form. (Use additional sheets as necessary).

Name NMLS ID No.
Identify applicable industry: Mortgage Debt Consumer Finance Money Services

5. Web Address

Provide the full web address(es) for the branch and any separate websites for other trade names identified in question 3 (if one exists).

(A) Website Address: _____
Is your company accepting applications or transacting business through this website? YES NO
(B) Website Address: _____
Is your company accepting applications or transacting business through this website? YES NO
(C) Website Address: _____
Is your company accepting applications or transacting business through this website? YES NO

6. Books and Records Information

Provide the information requested below for the records custodian maintaining records for this branch. Provide the name of the individual who should be contacted with inquiries or to gain access to the storage location. If multiple custodians maintain records for this branch, use the Comments field to indicate the types of records this custodian maintains. Use additional sheets if necessary.

 Company First Name Last Name

 Business Address City State Country/Province Postal Code
 (Do not provide PO Box)

() - ext () -
 Business Phone Fax Line Email Address

Identify applicable industry: Mortgage Debt Consumer Finance Money Services

Identify the state(s) for which every listed record custodian maintains records for the company: _____

Comments: _____

7. Operation Information

(a).	Will this branch office and/or individuals at this branch office operate pursuant to a written agreement or contract with the main office?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
(b).	Will this branch office have sole responsibility for decisions relating to individuals participating in financial-related services with respect to employment?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
(c).	Will this branch office have sole responsibility for decisions relating to individuals participating in financial-related services with respect to compensation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
(d).	Other than the entity, does anyone have responsibility for the expenses or have a financial ownership/liability interest in the activities of this branch? If answered yes, complete the following section for each person responsible for the expenses or with a financial ownership/liability interest.	YES <input type="checkbox"/>	NO <input type="checkbox"/>

8. Expense Information

Provide the following contact information about the party responsible for expenses or with a financial ownership/liability interest. Indicate whether or not the party maintains a financial services related license. In the Explanation provide the relevant details to the party's responsibility on expenses or financial ownership/liability interest. If no party other than the company is responsible for expenses of this branch, leave blank.

FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)	Business Address, City, State, Country/Province, Postal Code	Business Phone Number	Separately Licensed?		Explanation
			YES	NO	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

EXECUTION: The undersigned, swear (or affirm) as follows, that I executed this form on behalf, and with the authority, of said Applicant and said Applicant agrees to and represents the following:

- (1) That the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part of this application, are current, true and complete and are made under the penalty of perjury, or un-sworn falsification to authorities, or similar provisions as provided by law;
- (2) To the extent any information previously submitted is not amended, such information remains accurate and complete;
- (3) That the jurisdiction(s) to which an application is being submitted may conduct any investigation into the background of the applicant, and any related individuals or entities, in accordance with all laws and regulations for purposes of making a determination on the application;
- (4) To keep the information contained in this form current and to file accurate supplementary information on a timely basis; and
- (5) To comply with the provisions of law, including the maintenance of accurate books and records, pertaining to the conduct of business for which the applicant is applying.

If the Applicant has knowingly made a false statement of a material fact in this application or in any documentation provided to support the foregoing application, then the foregoing application may be denied.

Signature of applicant's representative

Date (MM/DD/YYYY)

REFERENCE ONLY