



Surrender

Jurisdiction-Specific Requirements



RHODE ISLAND CHECK CASHER BRANCH LICENSE

Instructions

1. Licensee must notify the RI Department of Business Regulation through the NMLS within 24 hours of terminating business under this license.
2. Any Surrender must also be reported on the applicable Form MU3.
3. The licensee must return the original license to the *State of Rhode Island Division of Banking* within 5 business days of the electronic submission of your surrender request to the following:

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

NMLS Branch Unique ID Number: _____

Licensee Legal Name: _____

Rhode Island Branch License Number: _____

Effective Date of Surrender: _____

ATTACHED	NOT APPLICABLE	ITEM
<input type="checkbox"/>	<input type="checkbox"/>	LICENSE. Enclose the original license as issued by the State of Rhode Island Division of Banking.

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.ri.gov for additional assistance.