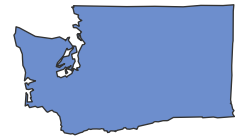




Surrender Checklist

Jurisdiction-Specific Requirements



WASHINGTON CONSUMER LOAN COMPANY LICENSE

Instructions

1. Surrender request must be filed in NMLS within 20 days of the event.
2. Confirm the Records Custodian and Records Location information listed in NMLS is accurate before filing surrender. Books & records must be accessible to DFI in compliance with RCW 31.04.155 and WAC 208-620-520.
3. Complete the Annual Assessment and Consolidated Annual Report (attached) that covers Washington activities from January 1, of the current year through the effective date of surrender. You must submit these reports even if you did no business in Washington since January 1. Send it to DFI outside NMLS along with your check payable to the "Washington State Treasurer" for any Assessment fee due per the instructions in the attached forms.
4. Update the Records Custodian and location of records for each branch. Surrender all branch licenses through NMLS.
5. All licensed Loan Originators sponsored by the company will be moved into an "Approved-Inactive" status as of the date of surrender.
6. Washington does not charge a fee for the actual surrender, but companies do pay an assessment on any business conducted from January 1st until the effective date of surrender.
7. 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 surrender through the NMLS at the following:

For U.S. Postal Service:

*Department of Financial Institutions
Division of Consumer Services
PO Box 41200
Olympia WA 98504-1200*

For Overnight Delivery:

*Department of Financial Institutions
Division of Consumer Services
150 Israel Rd SW
Tumwater WA 98501*

WHO TO CONTACT – Contact DFI's Division of Consumer Services licensing staff by phone at 360-902-8703, options 2, 3, 1 or email to DCS@dfi.wa.gov for additional assistance.

Company NMLS Number: _____

Company Legal Name: _____

Company's phone number: _____

ATTACHED	NOT APPLICABLE	WASHINGTON CONSUMER LOAN COMPANY LICENSE ITEM
<input type="checkbox"/>		ANNUAL ASSESSMENT & CONSOLIDATED ANNUAL REPORTS. Complete the attached Annual Assessment and Consolidated Annual Report for Washington activities from January 1 of the current year through the date of surrender. **You must submit these reports even if you did no business in Washington**
<input type="checkbox"/>	<input type="checkbox"/>	LOAN LISTS. Enclose your supporting list(s) of Washington loans (one for each assessment line item response that is not listed as 'none'). <ul style="list-style-type: none">• These lists must be in electronic format using Microsoft Excel software.• Email using secure transmissions to MortgageLicensing@dfi.wa.gov and ensure the email is labeled with the company's name, NMLS # and that the loan list pertains to a closure/surrender.
<input type="checkbox"/>	<input type="checkbox"/>	ASSESSMENT FEE. Make check payable to the Washington State Treasurer and ensure your company's NMLS # is in the "memo" section of the check.
<input type="checkbox"/>		ADDITIONAL SURRENDER INFORMATION. Complete the attached form about the future contact person and the pipeline information. If the future contact information changes, you must provide written notice of the changes to DFI.
<input type="checkbox"/>		SURRENDER REASON. If your company is surrendering its license but not ceasing doing business in Washington, indicate under which authority you will continue to do business in Washington. Your options are one or more of the following: <ul style="list-style-type: none"><input type="checkbox"/> Bank exclusion: See RCW 31.04.025, Consumer Loan Act<input type="checkbox"/> Doing business under the authority of Retail Installment Sales of Goods and Services Act: See chapter 63.14 RCW.<input type="checkbox"/> Other- Please specify: _____

**WASHINGTON STATE 2018 CONSUMER LOAN MAIN OFFICE CLOSURE/LICENSE SURRENDER
FORM**

ADDITIONAL INFORMATION

FUTURE CONTACT PERSON: _____
TITLE: _____
MAILING ADDRESS: _____

City County State Zip
PHONE NUMBER: _____
EMAIL ADDRESS: _____

NUMBER OF WASHINGTON LOANS IN PIPELINE*: _____
HOW ARE THESE LOANS BEING HANDLED? _____

*Include a list in excel format of all outstanding Washington loans in the pipeline

REASON FOR SURRENDER/CLOSURE: _____

**WASHINGTON STATE 2018 CONSUMER LOAN MAIN OFFICE CLOSURE/ SURRENDER FORM
ANNUAL ASSESSMENT REPORT (AAR)**

Name of company as licensed in Washington: _____

Main Office NMLS Number (CL-) Effective Date of Closure/Surrender: _____

Closure/Surrender Report is for business conducted from January 1, 2018 until date of closure

2018 WASHINGTON STATE CONSUMER LOAN ACTIVITY (ANSWER EVERY QUESTION OR WRITE IN "NONE")		Number of Loans	Dollar Volume	Number of Loans	Dollar Volume
LOAN ACTIVITY: ASSESSMENT		MORTGAGE	MORTGAGE	NON-MORTGAGE	NON-MORTGAGE
1	Enter the total principal balance of WA loans in your portfolio on your date of closure/surrender .				
2a	Enter the total principal amount of all WA loans <i>brokered or table funded</i> from January 1 through the effective date of closure or surrender . (not reverse mortgages)				
2b	Enter the total principal amount of all WA loans you <i>made</i> from January 1 through the effective date of closure or surrender . (not reverse mortgages)				
2c	Enter the total principal amount of all WA loans you purchased from January 1 through the effective date of closure/surrender . (not reverse mortgages)				
2d	Enter the advances made and accrued interest on Reverse Mortgages <i>table-funded, made, or purchased</i> from January 1 through the effective date of closure or surrender .				
2e	Subtotal: Add lines 1 through 2d. Enter total mortgage dollar volume on line 3, Enter total non-mortgage dollar volume on line 4.				
ASSESSMENT FEE CALCULATION				Dollar Volume	
3	Enter the total mortgage dollar volume from 2e here.				
4	Enter the total non-mortgage dollar volume from 2e here.				
5	Adjusted total loan volume: Add lines 3 and 4.				
6	Assessment fee: multiply line 5 by .000180271 (round to the nearest cent) enter the result here. Pay this amount. Make checks payable to the "Washington State Treasurer."				

**WASHINGTON STATE 2018 CONSUMER LOAN MAIN OFFICE CLOSURE/SURRENDER FORM
CONSOLIDATED ANNUAL REPORT (CAR)**

Main office NMLS Number: (CL-)

Closure/Surrender Report is for business conducted from January 1, 2018 until date of closure

I. 2018 WASHINGTON STATE CONSUMER LOAN ACTIVITY (ANSWER EVERY QUESTION OR WRITE IN "NONE")		Number of Loans	Dollar Volume
1	Enter the total principal balance of <i>WA residential mortgage loans in the licensee's portfolio on your date of closure/surrender.</i>		
2	Enter the total principal balance of <i>WA non-residential mortgage loans in the Licensee's portfolio on your date of closure/surrender.</i>		
3	For all loans that you own, enter the following information as of your date of closure/surrender:		
	3a. Interest Only Adjustable Rate Mortgages (ARMs)		
	3b. Payment Option ARMs		
	3c. Other first lien loans that permit negative amortization		
	3d. Introductory rate loans (Loans with low initial payments based on fixed introductory or "teaser" rate)		
	3e. Balloon Payment Loans		

II. 2018 WASHINGTON STATE RESIDENTIAL MORTGAGE LOAN SERVICING ACTIVITY (ANSWER EVERY QUESTION AND COMPLETE THE VOLUME INFORMATION BELOW OR WRITE IN "NONE")		Number of Loans	Dollar Volume
1	Servicing of Residential Mortgage Loans (includes loans serviced through a contract) <ul style="list-style-type: none"> if Yes, Enter the number of loans and principal balance on the date the loan was received for servicing (boarded) in 2018 or the principal balance on January 1, 2018, if boarded in previous year(s). 		
1a	If you reported loans in line 1 above that were also reported in AAR line 2b, 2c, and 2d: Enter the number of loans and dollar volume from lines 2b, 2c, and 2d of the AAR that that were serviced and reported above on line 1.		
1b	Servicing of Residential Mortgage Loans contracted to a sub-servicer <ul style="list-style-type: none"> if Yes, Enter the number of loans and principal balance on the date the loan was received for servicing (boarded) in 2018 or the principal balance on January 1, 2018, if boarded in previous year(s). (see line 9 below) 		

2018 WASHINGTON STATE RESIDENTIAL MORTGAGE LOAN SERVICING ACTIVITY (ANSWER EVERY QUESTION AND COMPLETE THE VOLUME INFORMATION BELOW OR WRITE IN "NONE")		Number of Loans	Dollar Volume
1c	Sub-servicing of Residential Mortgage Loans <ul style="list-style-type: none"> if Yes, Enter the number of loans and principal balance on the date the loan was received for servicing (boarded) in 2018 or the principal balance on January 1, 2018, if boarded in previous year(s). (see line 9 below) 		
2	Washington mortgage loans contractually delinquent 30 days or more at the date of closure/surrender.		
3	Washington Mortgage loans referred to loss mitigation during 2018.		
4	Washington mortgage loans that foreclosed during 2018.		
5	Washington mortgage loans modified under HAMP loan modifications during 2018.		
6	Washington mortgage loans modified under other loan modifications during 2018.		
7	Servicing of Personal Property Loans during 2018		
8	Loans paid off through short sale during 2018		
9	If you reported master or sub-servicing activity on line 1b or 1c above, enter the name, address, and phone number of sub-servicer or master servicers contracted with your company. Name: Address: Phone Number: Name: Address: Phone Number: Name: Address: Phone Number:		

AFFIDAVIT FOR 2018 CONSUMER LOAN ANNUAL ASSESSMENT REPORT AND CONSOLIDATED ANNUAL REPORT

(Please print clearly)

AFFIDAVIT OF PREPARER:

I hereby certify and swear (or affirm) under penalty of perjury that I have examined the information contained in this Annual Assessment Report (AAR), Consolidated Annual Report (CAR), and attached supporting documentation (including any accompanying schedules and statements – if any), and the reported information is correct and complete in accordance with the law, and further acknowledge that there are no misrepresentations or omissions of material facts.

Prepared By: _____
Signature *Date*

Typed or printed name of preparer *Title*

Phone: _____ Ext: _____ Fax: _____ E-mail: _____

AFFIDAVIT OF COMPANY OFFICIAL:

I, _____ the undersigned being the _____
Type or Print Name of Company Official *Title of Company Official*

of _____, a Washington licensed Consumer Loan Company,
Print Company Name as Licensed

hereby certify and swear (or affirm) under penalty of perjury that I have examined the information contained in this Annual Assessment Report (AAR), Consolidated Annual Report (CAR), and attached supporting documentation (including any accompanying schedules and statements – if any), and the reported information is correct and complete in accordance with the law, and further acknowledge that there are no misrepresentations or omissions of material facts.

Signature of Company Official

NOTARY:

Signed and sworn before me this _____ day of _____ 20____ and

I hereby certify that I am not an officer or director of this company. _____
Signature of Notary Public

notary seal here

Notary Public in and for the:
State of _____
County of _____
My appointment expires: _____