**GENERAL INFORMATION INTAKE FORM**

**FOR PROPOSED PROTOCOL APPLICANTS**

|  |  |
| --- | --- |
| **Company name & NMLS number:** |  |
| **Primary contact name & email:** |  |

**Do any of the following exclusions apply?**

Company is located outside of US Company is in marijuana industry

Prior unlicensed activity by applicant, applicant’s parent, or a subsidiary, affiliate, or control person of the applicant or parent

Control person has a felony or financially-related or dishonesty-related misdemeanor within   
 the last 10 years

|  |
| --- |
| Other(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| **Home State:** |  |

|  |  |
| --- | --- |
| **Primary business activities:** |  |

(payment processing, person to person transmission, business to business, etc.)

|  |  |
| --- | --- |
| **Do any of the company’s financial services involve cryptocurrency?** Yes No | |
| If yes, please describe (exchange, kiosk, wallet, etc.): |  |

**Is the company a start-up?** Yes No Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does the company have audited financials?** Yes No Notes:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Where is the company licensed now? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Will the company have an electronic surety bond in place at application?** Yes No |

**By what date will the company be ready to file the application in NMLS? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Be prepared to file an application with your assigned Phase One review state within 30 calendar days of receiving notification of acceptance. A **complete** Phase One application must be submitted within 60 calendar days after application. See the [Phase One Checklist](https://nationwidelicensingsystem.org/slr/Documents/Multistate%20MSB%20Licensing%20Program%20Phase%20One%20Checklist.pdf) in NMLS for specific requirements. Phase Two applications must be submitted within 90 calendar days after Phase One is complete.

**Review the** [**participating states' checklists**](https://nationwidelicensingsystem.org/slr/PublishedStateDocuments/MMLA%20Phase%202%20Checklists.pdf) **in NMLS for any state specific requirements that may make you ineligible or otherwise not interested in applying in a particular state.**

**In what states is the company interested in for licensure?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| California**\*** | Connecticut**\*** | Georgia**!** | Idaho**\*** | Illinois**\*** |
| Indiana**!\*** | Iowa**!\*** | Kansas**!** | Kentucky**\*** | Louisiana |
| Maine**\*** | Maryland**\*** | Massachusetts! | Michigan! | Minnesota**!** |
| Mississippi | Nebraska**!\*** | North Carolina | North Dakota**!** | Ohio**!\*** |
| Oregon**!\*** | Pennsylvania | Rhode Island**!\*** | South Carolina**!\*** | South Dakota**!\*** |
| Tennessee**!\*** | Texas**!** | Utah**\*** | Vermont**!\*** | Washington |
| Wisconsin | Wyoming**!** |  |  |  |

States in red are eligible to perform a Phase One review

! Denotes a state that requires an electronic surety bond in order to submit an application

\* Denotes a state that requires audited financials in order to submit an application

**Do you have a preference for the Phase One review state? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Your preference is just one of a number of factors we look at when assigning your Phase One reviewing state.

**Other notes or comments:**