



STATE OF KANSAS
OFFICE OF THE STATE BANK COMMISSIONER
CONSUMER AND MORTGAGE LENDING DIVISION
700 SW Jackson St., Suite 300
Topeka, KS 66603-3796
785-296-2266 Fax: 785-296-6037

Attention Mortgage Lenders & Loan Originators



The Division of Consumer and Mortgage Lending will soon join the Nationwide Mortgage Licensing System (NMLS) beginning January 4, 2010.

New companies or individuals desiring to conduct mortgage loan origination activities with Kansas consumers under the Kansas Uniform Consumer Credit Code should submit their application to the Division through the NMLS beginning January 4, 2010.

The NMLS website, <http://mortgage.nationwidelicencingsystem.org>, provides step-by-step instructions on how to access the system, guides on how to complete the MU forms, tutorials and much more. If you have questions, contact the NMLS Call Center at 240-386-4444.

All Companies that **DO NOT** conduct mortgage loan origination activities but are conducting activities that require them to obtain a Supervised Loan License must use the application listed below.

Supervised Loan License Application and Notification Form

A Supervised Loan is defined in Kansas as a loan to which the annual percentage rate exceeds 12% per year made by a person regularly engaged in the business of making loans in which: the debtor is a person other than an organization; the debt is incurred primarily for personal, family, or household purpose; either the debt is payable by written agreement in more than four installments or a finance charge is made; and either the amount financed does not exceed \$25,000 or the debt is secured by an interest in land.

A **Supervised Loan License** is required for any business that engages in making supervised loans; taking assignments of and directly or indirectly, including through the use of servicing contracts or otherwise, undertaking collection of payments from debtors arising from supervised loans; or taking assignments of and directly or indirectly, including through the use of servicing contracts or otherwise, enforcing rights against debtors arising from supervised loans with **Kansas** consumers.

Filing of Notification is required by the Kansas Uniform Consumer Credit Code (K.S.A. 16a-6-201) for all creditors engaged in this state in entering into consumer credit transactions and to any person who takes assignments of and undertakes collection of payments from or takes assignments of and enforces rights against debtors arising from these transactions. The notification fees prescribed are to be paid to the Kansas Office of the State Bank Commissioner (OSBC).

All Supervised Lender licensees who engage in mortgage loan activities must ensure individuals who originate mortgage loans on their behalf are properly registered as Mortgage Loan Originators. **“Residential mortgage loan originator”** means an individual: (a) Who engages in residential mortgage loan origination on behalf of a single supervised lender; (b) whose conduct of residential mortgage loan origination is the responsibility of the licensed supervised lender; (c) who takes a residential mortgage loan application or offers or negotiates terms of a residential mortgage loan for compensation or gain or in the expectation of compensation or gain; and (d) whose job responsibilities include contact with borrowers during the loan origination process, which can include soliciting, negotiating, acquiring, arranging or making mortgage loans for others, obtaining personal or financial information, assisting with the preparation of loan applications or other documents, quoting loan rates or terms or providing required disclosures. It does not include any individual engaged solely as a loan processor or underwriter. **New companies or individuals desiring to conduct mortgage loan origination activities with Kansas consumers under the Kansas Uniform Consumer Credit Code should submit their application to the OSBC through the NMLS beginning January 4, 2010.**

KANSAS SUPERVISED LOAN LICENSE NEW APPLICATION & NOTIFICATION FORM

PART A: Supervised Loan License Application

1. Applicant Name and Federal Tax Identification Number: Federal Tax ID No. _____

(Legal name under which business is conducted) (Type or print)

2. Trade name (d/b/a), if applicable*: _____

***Note: d/b/a's cannot contain words such as Company, Corporation, Incorporated, Co., Inc., Corp., LTD, LLC, or LLP. If you have further questions please contact the Office of the State Bank Commissioner.**

3. Applicant's contact person: _____
(Name) (Phone Number)

E-mail address of Applicant's contact person: _____

Note: All correspondence sent to your company by mail or e-mail will be addressed to the contact person listed here. It is your responsibility to update this information as needed. All changes must be submitted by an authorized individual.

4. Supervised Lender Applicant's Phone # (_____) Fax (_____) _____

5. Principal business address (corporate headquarters/home office): _____
(Street address)

(City) (State) (Zip code)

Applicant's website: _____

Is any other business, including business by another company, being conducted at this business address?

_____ No _____ Yes (If Yes, please explain) _____

6. Mailing address for **all** correspondence with your company: (Do not leave blank)
Note: All correspondence will be mailed to the attention of your contact person listed above at this mailing address.

(Street) (City) (State) (Zip code)

7. For examination purposes: Where are the records for your Kansas loan files retained?
(Please mark one answer)
_____ Main business location
_____ Each branch location
_____ Main business location and each branch location(s)
_____ Other (please explain in detail) _____

8. Will your company, in the normal course of business, make 1st mortgage loans, 2nd mortgage loans, or other consumer loans in Kansas that exceed 12% APR, or take assignment of and directly or indirectly, including through the use of servicing contracts or otherwise, undertake collection of payments from or enforce rights against debtors arising from loans with these characteristics?
_____ No _____ Yes

Note: If you answered No to Question 8, you may not be completing the correct license application for the type of activity conducted by your company. Please contact our office to determine if you need to submit a different application for another type of license.

9. Type of loan activity to be conducted with Kansas consumers: (Mark all that apply)

Non Real Estate Only Non Real Estate & Mortgage Loans
 Mortgage Loans Only Payday Loans Servicing
 Other (Please explain) _____

10. Form of your Company: (Please mark one)

Sole Proprietorship
 Partnership Limited General **(Attach a copy of agreement)**
 Corporation; List state and date of incorporation _____
(Attach a certified copy of the Articles of Incorporation)
 Limited Liability Company; List state and date of organization _____
(Attach a certified copy of the Articles of Organization)

11. Are there any other locations, other than the principal place of business, where your company engages in making supervised loans or any loans for personal, family, or household purposes; or taking assignment of and undertaking collection of payments from or enforcement of right against debtors arising from loans made to **Kansas** consumers?

No Yes **(If "Yes", please attach a Supervised Lender Branch Application form (Form D) for each location.)**

12. (a) **Owner, Officer and/or Partner:** List below every officer and/or partner of the applicant and any equitable owner of 10% or more of the applicant. (Attach additional pages if necessary)*

Name	Title	Percent owned
1.		
2.		
3.		
4.		

***Note: Every individual listed above must complete a separate Confidential Background Information Consent Form (Form A) which includes a fingerprint card requirement.**

Does applicant intend to engage in mortgage loan origination activities?

Yes (STOP – This application should be submitted through the NMLS website as indicated in the instructions above.)

No (Move on to Question 13)

13. Has the applicant or any individual identified in Question #12 (a) or (b) ever:

- a. had any administrative or judicial judgments filed against you?
- b. been the subject of any tax liens or other liens of any nature?
- c. filed for personal or business related bankruptcy?
- d. had a license or other authority to conduct business suspended, revoked, or denied?
- e. been named as a defendant in any form of civil litigation related, directly or indirectly, to consumer or mortgage lending activities, or involving fraud, dishonesty, or deceit?
- f. been charged or convicted of any crime (other than minor traffic violations)?

No Yes (If Yes, applicant must provide a detailed explanation on attached sheet.)

14. Do any of the individuals identified in Question #12 (a) or (b) have a financial interest in or hold a position with any other licensee under the Kansas Mortgage Business Act or the Kansas Uniform Consumer Credit Code?

No Yes **(If Yes, provide detailed explanation on an attached sheet)**

23. Each applicant for a Supervised Loan License who engages in or intends to engage in making loans secured by an interest in real property or contracts for deed must maintain a minimum net worth of \$250,000 evidenced by submitting a financial statement completed within the past twelve months accompanied by a written statement signed by an independent certified public accountant attesting that the statement has been reviewed and is in compliance with generally accepted accounting principles. At least 20% or \$100,000 of the net worth, whichever is less, must be comprised of liquid assets consisting of cash or readily marketable securities registered on a national securities exchange.

Reviewed or Audited Financial Statement is enclosed: Yes _____ No - Not Applicable _____

Signature and Oath of Applicant by Authorized Individual

(Authorized individuals are those that have been identified by your company in Question 12 above and have submitted Confidential Background Information Consent Forms to the OSBC with this application. Signatures of unauthorized individuals on this form or any other applications submitted to the OSBC will not be accepted.) I hereby swear and affirm that the information contained herein and attachments hereto are true and correct to the best of my knowledge and belief. Further, the provisions of K.S.A. 16a-1-101 et. seq. have been reviewed by the applicant, its owners and officers, and all employees of the applicant will be made aware of such laws and regulations and any changes enacted hereafter. I understand it is the responsibility of the applicant to insure compliance with these laws and regulations by its owners, officers, and employees, and that failure to do so may result in the supervised loan license being denied, suspended, or revoked. Further, I understand that providing any false or misleading information may result in the license being denied, suspended, or revoked.

(Authorized signature of officer, partner or owner) (Title or position) (Date)

STATE OF _____ COUNTY OF _____

Sworn and subscribed before me on _____ by _____
(Date) (Print name of officer, partner or owner listed above)

(NOTARY SEAL) _____ My commission expires: _____
Notary Public Signature

Fee Reconciliation

<u>Type of Fee</u>	<u>Amount of Fee</u>	X	<u>Number</u>	<u>=Total</u>
New Application fee (corporate headquarters)	\$600.00	X	<u>1</u>	=\$ <u>600.00</u>
Branch Application fee (Form D)	\$600.00	X	_____	=\$ _____
License Fee	\$300.00	X	<u>1</u>	=\$ <u>300.00</u>
Fingerprint Card Processing Fee per card	\$50.00	X	_____	=\$ _____
Notification Fees from Page 8				=\$ _____
	Total Fees Due			=\$ _____

All fees are nonrefundable and must accompany the application before processing will begin.

Make Checks Payable to: OFFICE OF THE STATE BANK COMMISSIONER
Mail to: 700 SW Jackson, Suite 300
Topeka, KS 66603-3796

PART B: INSTRUCTION SHEET FOR NOTIFICATION FORM

The Kansas Uniform Consumer Credit Code (K.S.A. 16a-6-201) requires creditors engaged in this state in entering into consumer credit transactions, and any person who takes assignments of and undertakes collection of payments from or takes assignments of and enforces rights against debtors arising from these transactions to file notification and pay the prescribed fees on or before **April 30** of each year to the Office of the State Bank Commissioner, 700 SW Jackson, Ste. 300, Topeka, Kansas 66603-3796. After reading instructions, if you need assistance in completing the form, please call (785) 296-2266. Once your registration is approved, your company will be added to the list of Notification Registrants displayed on our website at www.osbckansas.org.

WHO HAS TO FILE NOTIFICATION AND PAY THE \$25.00 ANNUAL FEE?

A consumer credit transaction is made in this state if a signed writing evidencing the obligation or offer of the consumer is received by the creditor in this state; or the creditor induces the consumer who is a resident of this state to enter into the transaction by solicitation in this state by any means, including but not limited to: mail, telephone, radio, television or any other electronic means. You extend credit under Kansas law if you engage in any of the following activities:

1. Those who extend credit to which a finance charge is added to the actual cost of goods or services;
2. Those who add a service or carrying charge to an account as a cost of deferring payment;
3. Those who prepare retail installment contracts and assign these contracts to a third party;
4. Those who extend credit according to a written agreement which permits payment in more than four installments, even though no finance charge is added; or
5. Those who purchase retail installment contracts, loans or leases from sellers, lenders, or lessors.

Sellers and Lessors. Those who regularly engage in the business of selling or leasing goods or services to persons for personal, family, or household purposes who either imposes a finance charge or agrees to accept payment by written agreement in more than four installments, must file notification and pay the \$25.00 annual fee for each business location. Every seller or lessor who initiates a consumer sale or lease must file whether he holds the contract himself or assigns or sells it to a third party.

Lenders. Those who regularly engage in the business of lending money to persons for personal, family, or household purposes, who agrees either to accept payment in more than four installments or imposes a finance charge, must file notification and pay the \$25.00 annual fee for each location holding a Kansas supervised loan license.

Assignees. Those who take assignments of and undertakes collection of payments from or takes assignments of and enforces rights against debtors arising from the above-mentioned sales, leases, or loans must file notification and pay the \$25.00 annual fee for each business location plus additional fees.

WHO IS EXEMPT?

Sellers who accept lender credit cards (e.g. bank credit cards) EXCLUSIVELY need not file.

Sellers and Lenders who sell or lend EXCLUSIVELY for business or agricultural purposes need not file. (Business purposes means a business selling to other businesses only - no consumer business).

Sellers and Lenders who are engaged EXCLUSIVELY in making credit transactions secured by a first real estate mortgage need not file, unless transactions are brought under the Kansas Uniform Consumer Credit Code by agreement or unless the loan to value ratio exceeds 100% or if the annual percentage rate exceeds the "code mortgage rate". All Supervised Loan Licensees must file notification based on the activities presumed to be conducted under that license.

WHO HAS TO PAY ADDITIONAL FEES?

Sellers, Lessors or Lenders who are required to file notification shall pay an additional fee of \$35.00 for each \$100,000 or part thereof of the average unpaid balance, including unpaid scheduled periodic payments under consumer leases, arising from consumer credit transactions entered into in this state and held on the last day of each calendar month during the preceding calendar year and held either by the seller, lessor, or lender or by the immediate or a remote assignee who has not filed notification. The unpaid balances of assigned obligations held by an assignee who has not filed notification are presumed to be the unpaid balances of the assigned obligations at the time of their assignment by the seller, lessor or lender. **Sellers or lessors who assign contracts to assignees which are not registered with our office must pay volume fees on the total amount assigned to those companies.** The OSBC website contains a listing of approved Notification registrants at www.osbckansas.org.

Assignees who are required to file notification shall pay an additional fee in the amount of \$35.00 for each \$100,000 or part thereof of the average unpaid balances including unpaid scheduled periodic payments payable by lessees, arising from consumer credit transactions entered into in the state taken by assignment or purchased and held on the last day of each calendar month during the preceding calendar year.

INSTRUCTIONS FOR COMPUTATION OF FEES

ANNUAL FEE:

Item 1. Those required to file shall pay an annual fee of \$25.00 for each business location from which consumer credit transactions are made and/or taken by assignment. Number of locations times \$25.00 is the total annual notification fee payable.

ADDITIONAL FEES:

Item 2. To be completed by all SELLERS, LESSORS, LENDERS.

Item 2a. The average unpaid balance equals the total unpaid consumer credit balances held on the last day of each calendar month, including unpaid scheduled periodic payments under consumer leases. Divide this total by 12 which will give the average unpaid balances for the preceding calendar year.

Item 2b. If consumer credit transactions are assigned during the year to any person or organization who has **not** filed notification with this agency **including state or national banks or state or federally chartered savings and loans or credit unions which do not file notification**, you must total the amounts assigned for the year and report them in Item 2b. Example: If you only assign contracts to one **national bank** and the amount of consumer credit transactions assigned to that **national bank** totaled \$250,000 for the year, the amount to report in Item 2b. would be \$250,000. If consumer credit transactions are assigned to multiple assignees who have **not** filed notification, the amounts assigned must be totaled together and reported in Item 2b. On the OSBC website at www.osbckansas.org, search the list of approved Notification registrants to determine if an assignee has filed notification.

Item 2c. Add together the average unpaid balance in Item 2a. and the total amount of consumer credit transactions assigned to third parties who have not filed notification as reported in Item 2b.

Item 2d. Additional fee of \$35.00 for each \$100,000 or part thereof of Item 2c.

Item 3. FOR ASSIGNEES ONLY. "Assignees" is a firm or person who purchases consumer credit sales contracts, consumer leases, or consumer loans from a seller, lessor or lender.

Item 3a. The average unpaid balances arising from consumer credit transactions for the preceding calendar year is determined by totaling unpaid balances, including unpaid scheduled periodic payments under consumer leases, at the end of each month. Divide this total by 12, which will give the average unpaid balance for the preceding calendar year.

Item 3b. Additional fee of \$35.00 for each \$100,000 or part thereof of Item 3a.

Item 4. Total of Items 1, 2d and 3b. Make check payable to Office of the State Bank Commissioner.

EXAMPLE OF COMPUTATION OF FEES

ANNUAL FEE:

1. Number of Locations (See Line G. above) 2 X \$25.00.....\$ 50.00

ADDITIONAL FEES:

2. SELLERS, LESSORS, OR LENDERS:

a. Average unpaid balances for the preceding calendar year \$ 5,000

b. Total amount assigned or sold to third parties who have NOT filed notification\$ 200,000

You must total the amount of contracts assigned to companies or organizations who have not filed notification including amounts assigned to banks, savings and loans and credit unions. See Instructions.

c. Balance on which additional fee is to be paid (Total Items 2a and 2b above)..... \$ 205,000

d. Additional fees due - \$35.00 for each \$100,000 or part thereof of Item 2c.(\$35 x 3 = \$105).....\$ 105.00

3. ASSIGNEES ONLY:

a. Average unpaid balances for the preceding calendar year \$ 708,000

b. Additional fees due - \$35.00 for each \$100,000 or part thereof of Item 3a.....(\$35 x 8 = \$280).....\$ 280.00

4. **TOTAL FEES PAYABLE:** (Items 1, 2d and 3b)\$ 435.00

If you receive this form and believe that you are not subject to the notification requirements of the Kansas Uniform Consumer Credit Code, give reason on form and return immediately.

**FAILURE TO FILE NOTIFICATION IS A CLASS A MISDEMEANOR SUBJECT TO IMPRISONMENT AND/OR FINE.
THE ADMINISTRATOR MAY IMPOSE ADDITIONAL FINES UP TO \$5,000 PER OCCURANCE.**

STATE OF KANSAS NOTIFICATION FORM

Date _____

Persons engaged in making Kansas Consumer Credit Sales, Leases and/or Loans and the Assignees of obligations arising from these transactions shall file notification and pay prescribed fees within 30 days after commencing business in this State, and thereafter on or before April 30 of each year. Make check payable to Office of the State Bank Commissioner, 700 SW Jackson St., Suite 300, Topeka, Kansas 66603-3796.

A. Name of Applicant _____
(Name under which business is transacted including dba name if applicable)

Federal Tax Identification Number _____ Internet Website Address _____

B. Contact Person _____ Phone # _____

C. Address of Applicant _____ County _____

D. Mailing address if different than C. _____

E. Type of Business Conducted _____

F. Business is Conducted: At Office () By Mail () Internet () Other Electronic Means ()-Specify Type: _____

G. Number of Locations from which Kansas consumer credit transactions are made or taken assignment of _____ List Full Name and Address - Attach Sheet if needed.

Table with 6 columns: Name, Street, City, State, Zip, County. Rows 1 and 2 for listing locations.

H. If Contracts are assigned or sold to a Third Party, list Name and Address of each Assignee below, and the number and dollar amount of contacts assigned or sold during the preceding calendar year - Attach sheet if more space is needed.

Table with 7 columns: Name, Street, City, State, Zip, Number, Dollar Amount. Rows 1 and 2 for listing assignees.

COMPUTATION OF FEE & RECONCILIATION (See Instruction Sheet)

ANNUAL FEE:

1. Number of Locations (See Line G. above) _____ X \$25.00.....\$ _____

ADDITIONAL FEES:

2. SELLERS, LESSORS, OR LENDERS:

a. Average unpaid balances for the preceding calendar year \$ _____

b. Total amount assigned or sold to third parties who have NOT filed notification\$ _____

You must total the amount of contracts assigned to companies or organizations who have not filed notification including amounts assigned to banks, savings and loans and credit unions. Search the list of approved Notification registrants on the OSBC website at www.osbckansas.org, to determine if an assignee has filed notification.

c. Balance on which additional fee is to be paid (Total Items 2a and 2b above)..... \$ _____

d. Additional fees due - \$35.00 for each \$100,000 or part thereof of Item 2c.\$ _____

3. ASSIGNEES ONLY:

a. Average unpaid balances for the preceding calendar year \$ _____

b. Additional fees due - \$35.00 for each \$100,000 or part thereof of Item 3a.....\$ _____

4. TOTAL FEES PAYABLE: (Items 1, 2d and 3b)\$ _____

I hereby notify you that we are or plan to be engaged in extending or taking assignment of consumer credit and verify the amounts stated above are true and correct to the best of my knowledge.

Signature _____ Print Name _____

Confidential Background Information Consent Form *For Owners, Officers and Partners*

SECTION A: To be completed by new Owner, Officer or Partner

I understand the Kansas Office of the State Bank Commissioner may conduct an investigation of the applicant and the applicant's owners, officers and partners for the purpose of determining the suitability of the applicant named below to hold a Supervised Loan License or a Mortgage Company License in the State of Kansas. I hereby authorize and request all state and federal law enforcement authorities, all state and federal regulatory and licensing authorities, and all credit reporting agencies to furnish information about me regarding criminal records, investigations, background information, licensing, credit reports, and other information of whatever kind and nature, whether known to me or otherwise, to the Kansas Office of the State Bank Commissioner.

Further, I understand the Kansas Office of the State Bank Commissioner shall be under no obligation to disclose such information to me or any other person, and that if such information indicates a violation of law; it may be shared with any agency responsible for investigating or prosecuting the violation. A copy of this authorization shall be accepted with the same force and validity as the original.

_____ Full name of owner, officer or partner (type or print)

_____ Residence address: (Street) (City) (State) (Zip Code)

_____ (Date of birth) (Social Security Number*) (Telephone Number)

Provide your company's name (applicant): _____

Provide the current Kansas license number of your company: _____
(N/A if submitted with a new application)

Your title or position: _____

Have you ever:

- a. had any administrative or judicial judgments filed against you?
- b. been the subject of any tax liens or other liens of any nature?
- c. filed for personal or business related bankruptcy?
- d. had a license or other authority to conduct business suspended, revoked, or denied?
- e. been named as a defendant in any form of civil litigation related, directly or indirectly, to consumer or mortgage lending activities, or involving fraud, dishonesty, or deceit?
- f. been charged or convicted of any crime (other than minor traffic violations)?

_____ No _____ Yes (If Yes to any of the above, must provide a detailed explanation on attached sheet.)

Do you have a financial interest in or hold a position with any other licensee under the Kansas Mortgage Business Act or the Kansas Uniform Consumer Credit Code?

_____ No _____ Yes (If Yes to any of the above, must provide a detailed explanation on attached sheet.)

_____ (Signature of owner, officer or partner listed above.) _____ (Date)

STATE OF _____) COUNTY OF _____)

Sworn and subscribed before me on _____ by _____
(Date) (Print name of owner, officer or partner listed above.)

(NOTARY SEAL) _____ My commission expires: _____
Notary Public Signature

SECTION B: Fingerprint Card and Processing Fee Requirement:

Each new owner, officer or partner of applicant or licensee must include completed fingerprint card and \$50 fingerprint processing fee with completed Form A. Only one fingerprint card is required per individual (i.e. If an officer of a Mortgage Company licensee is also a loan originator, both Forms A and G must be submitted with only one fingerprint card and appropriate processing fee.) Fingerprint cards should only be requested by the contact person located at the mailing address of the applicant/licensee. Requests from branch offices will not be processed.

TO REQUEST FINGERPRINT CARDS:

1. Applicants/Licensees must fax a completed Fingerprint Card Request Form (Form H) to the OSBC. A copy of Form H is enclosed and is also available on the OSBC website. The requested number of fingerprint cards with instructions will be mailed only to the contact person at the mailing address of the licensee to distribute to individuals meeting the fingerprint requirements.
2. The fingerprint card must be completed as directed in the instructions and returned to the licensee.
3. Applicants/Licensees must submit both the completed fingerprint card and this application to the OSBC with the appropriate processing fee. Personal checks will not be accepted. Fingerprints will generally not be required for any individual more often than annually.

SECTION C: To be completed by Authorized Owner, Officer or Partner of Applicant or Licensee other than individual identified in Section A above. (Authorized individuals are those that have been identified by your company and have submitted Confidential Background Information Consent Forms to the OSBC. Signatures of unauthorized individuals on this form or any other applications submitted to the OSBC will not be accepted and returned.)

Company Name (Print): _____

I hereby advise the OSBC of the addition of the individual named above as an owner, officer or partner. I understand I am required to notify the OSBC within 10 days of the addition or departure of any owner, officer or partner by submitting the required documents and fees. I further understand that licenses are non-transferable and non-assignable, and no other entity may conduct business under the authority of our license. I understand I am required to notify the OSBC in writing and provide detailed information regarding corporate reorganizations or structure changes.

Signature of Authorized Owner, Officer or Partner other than individual Identified in Section A above	Print Name & Title	Date
---	--------------------	------

Make checks payable to: **Office of the State Bank Commissioner, 700 SW Jackson, Ste. 300, Topeka, KS 66603-3796.**

CHECKS MUST BE DRAWN ON LICENSEE'S COMPANY ACCOUNT. PERSONAL CHECKS WILL NOT BE ACCEPTED.

*Providing a social security number is voluntary, however, if it is not provided application processing may be delayed. The number is requested pursuant to K.S.A. 9-2201 et seq., and/or 16a-1-101 et seq., and may be used to identify applicants in criminal history and financial information investigations, provided to the Kansas Department of Revenue pursuant to K.S.A. 74-139 and/or provided to the Kansas Department of Social and Rehabilitation Services pursuant to K.S.A. 74-148 and K.S.A. 39-758.

State of Kansas
OFFICE OF THE STATE BANK COMMISSIONER
700 SW Jackson St., Suite 300
Topeka, Kansas 66603-3796
785-296-2266 Fax: 785-296-6037

SURETY BOND
SUPERVISED LENDER or MORTGAGE COMPANY

Bond Number _____ Amount \$ _____

KNOW ALL MEN BY THESE PRESENTS, that we,

(applicant/licensee name)

of the City of _____, County of _____, State of _____ as principal and obligor, and _____, as

Surety are held and firmly bound unto the State of Kansas, Office of the State Bank Commissioner (hereinafter "OSBC") in the penal sum of \$_____ for payment of which, well and truly to be made, we hereby bind ourselves and each of our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, Principal is applying to become a licensed supervised lender pursuant to K.S.A. 16a-2-302, or has applied for a license to conduct mortgage business pursuant to K.S.A. 9-2204, and seeks to establish, meet, and maintain the financial responsibility requirements of the OSBC during the term of the subject license or registration by tender of the within bond,

NOW, THEREFORE, the condition of the foregoing obligation is such that:

1. If the Principal faithfully performs all its obligations under applicable state and federal law, including the Uniform Consumer Credit Code ("UCCC"), K.S.A. 16a-1-101 *et seq.* and amendments thereto, and/or the Kansas Mortgage Business Act ("KMBA"), K.S.A. 9-2201 *et seq.* and amendments thereto, or any rule or regulation lawfully adopted under said Code and/or Act with respect to acting as a supervised lender or mortgage lender or broker, this obligation will be void; otherwise the same will remain in full force and effect.

2. Surety agrees to promptly (within sixty [60] days) remit payment as instructed by the OSBC upon receiving notice that any of the following has not been paid by the Principal: any lawful expenses incurred, or fees levied, by the OSBC; any expenses, fines, fees, or refunds pursuant to a settlement agreement with the OSBC; any expenses, fines and fees that become lawfully due pursuant to a final judgment or order; or any losses or damages which are determined by the OSBC to have been incurred by any borrower or consumer as a result of the Principal's, or its agent's, failure to faithfully comply with the provisions of Kansas law, including the requirements of the UCCC and/or the KMBA, or any rule or regulation lawfully adopted under said Code and/or Act.

PROVIDED, that the Surety's aggregate liability for any and all claims which may arise under this bond shall in no event exceed the amount of this bond, regardless of the number of claims or claimants.

FURTHER PROVIDED that this Bond shall remain effective continuously subject to the termination or reduction in liability as provided in this paragraph. The Surety shall have the right to terminate or reduce its liability hereunder only by giving the Principal and the OSBC written notice of such termination by written notification via certified mail to the State of Kansas Office of the State Bank Commissioner at least thirty (30) days prior to the effective date of such termination; provided, however, that the Principal and Surety shall be and remain liable for a period of two (2) years from the date of termination for any action or inaction of Principal, occurring during the effective period of the bond, that

gives rise to a claim under this bond, unless released in writing, in whole or in part, from such liability by the Administrator or the Commissioner.

FURTHER PROVIDED that after giving notice of termination or reduction of liability, the surety may reinstate or increase its liability by the execution and filing of a new bond or by mailing written notice to the OSBC indicating that the Surety desires to continue as surety for the licensee and that its prior notice of termination or reduction of liability is withdrawn and rescinded.

FURTHER PROVIDED that, if this bond is not previously terminated as set forth above, the liability of the Surety shall expire two (2) years after the date of the surrender, revocation, or expiration of the subject license, whichever shall first occur.

THIS BOND shall be effective on and after _____, or, if left blank, the day of execution by Surety shall be the effective date of the bond. The bond shall be effective, if accepted by the OSBC, without further notice.

IN WITNESS WHEREOF, we have duly executed the foregoing obligation this ___ day of _____, _____.

LICENSEE:

(Licensee's Name)

(Signature)

(Print Signature Name)

(Title) (Date)

[CORPORATE SEAL]
(If Any)

Surety Must Attach Power of Attorney

(Surety)

(Signature)

(Print Signature Name)

(Telephone Number) (Date)

Name, address, and telephone number of the Surety representative to contact in the event a claim must be filed:

STATE OF KANSAS
OFFICE OF THE STATE BANK COMMISSIONER
CONSUMER AND MORTGAGE LENDING DIVISION
 785-296-2266 Fax: 785-296-6037

State Regulator Questionnaire on Applicant

APPLICANT SECTION: Duplicate this form as needed. Complete this section and forward to the regulatory authorities of the states in which you are currently licensed to conduct business. Include a stamped envelope addressed to the agency below.

Name and Address of Company (Applicant): _____

_____ (Street address) (City) (State) (Zip Code)

Date of Original License: _____ Type of License: _____

License Number: _____ Expiration Date: _____

I hereby authorize the State of _____ to furnish the information requested below.

Date: _____ Name and Title _____ Signature _____

STATE REGULATOR SECTION: The above named company has made application to conduct business in Kansas. The applicant stated that they are licensed and regulated by you. Please respond to the following questions and return the completed form to the address stated below.

- | | | | |
|----|--|----------|-----------|
| 1. | Is the applicant information listed above accurate? | _____ No | _____ Yes |
| 2. | Did you conduct an investigation of this applicant prior to issuing a license? | _____ No | _____ Yes |
| 3. | Have you received any complaints against this applicant? | _____ No | _____ Yes |
| 4. | Have you conducted an examination or audit of their operation? | _____ No | _____ Yes |
| 5. | Have you taken any disciplinary action against this company?
(If "Yes", please explain) | _____ No | _____ Yes |

6. Any additional comments will be appreciated. Please attach additional pages if necessary.

I certify that the information contained herein and attached is true and correct according to the official records of this State.

Date _____ State Agency Name _____

Name and Title of person completing questionnaire _____

Telephone No. _____ Signature _____

Please return completed questionnaire to:

**OFFICE OF THE STATE BANK COMMISSIONER
 CONSUMER AND MORTGAGE LENDING DIVISION
 700 SW JACKSON ST., SUITE 300
 TOPEKA, KS 66603-3796**

Instructions: Complete this form and return with the **\$600.00** fee for each additional branch office to be licensed. Make checks payable to the Office of the State Bank Commissioner, 700 SW Jackson, Ste. 300, Topeka, KS 66603-3796.

Supervised Lender Branch Application

1. Current Kansas Supervised Lender License Number*: _____
(*N/A if submitted with a NEW Supervised Loan License application)

2. Name of Company: _____
(Legal Name)

3. Trade name (d/b/a), if applicable*: _____

***Note: d/b/a's cannot contain words such as Company, Corporation, Incorporated, Co., Inc., Corp., LTD, LLC, or LLP. If you have further questions please contact the Office of the State Bank Commissioner.**

4. Branch business address: _____
(City) (State) (Zip Code) (Street) Phone (____) _____

5. Is any other business, including business by another company, being conducted at this business address?
_____ No _____ Yes (If Yes, please explain) _____

6. For examination purposes: Are loan documents maintained at this location? _____ Yes _____ No
(If No, please explain) _____

To be completed by Authorized Owner, Officer or Partner of Supervised Loan Licensee: (Authorized individuals are those that have been identified by your company and have submitted Confidential Background Information Consent Forms to the OSBC. Signatures of unauthorized individuals on this form or any other applications submitted to the OSBC will not be accepted and returned.)

I hereby request the addition of the new branch location identified above. I understand Supervised Loan Licensees are responsible for all activities conducted at their branch locations. I understand I am required to notify the OSBC within 10 days of the address change or closure of branch locations. I further understand that Supervised Loan Licenses are non-transferable and non-assignable, and no other entity may conduct business under the authority of our Supervised Loan License.

Signature of authorized owner, officer or partner: _____

(Print Name of owner, officer or partner) (Title) (Date)

STATE OF _____) COUNTY OF _____)

Sworn and subscribed before me on _____ by _____
(Date) (Print Name of owner, officer or partner listed above.)

(NOTARY SEAL) _____ My commission expires: _____
Notary Public Signature

New Branch Application Fee: \$600.00 for each NEW branch location to be licensed. NOTE: In addition to submitting a new branch license application, a rider to your existing surety bond increasing the amount of coverage may be necessary. Review the surety bond requirements and contact the OSBC with questions. If applicable, enclose the necessary Confidential Background Information Consent forms (Form A) for any owner, officer or partner associated with this location that has not already filed this form with the Office of the State Bank Commissioner.

**Providing a social security number is voluntary, however, if it is not provided application processing may be delayed. The number is requested pursuant to K.S.A. 9-2201 et seq., and/or 16a-1-101 et seq., and may be used to identify applicants in criminal history and financial information investigations, provided to the Kansas Department of Revenue pursuant to K.S.A. 74-139 and/or provided to the Kansas Department of Social and Rehabilitation Services pursuant to K.S.A. 74-148 and K.S.A. 39-758.

