

MONTANA CONSUMER FINANCE RENEWAL FORM

Complete one form for the principal office and additional forms for each branch office.

Check which one who applies.

- | | |
|--|---|
| <input type="checkbox"/> Consumer Loan Company (\$500) | <input type="checkbox"/> Consumer Loan Branch (\$500) |
| <input type="checkbox"/> Sales Finance Company (\$100) | <input type="checkbox"/> Sales Finance Branch (\$100) |
| <input type="checkbox"/> Escrow Business (\$100) | |

NMLS #: _____

I, _____ (authorized individual) of _____ (company) and duly appointed and authorized by the same, swear (or affirm) on _____ (date) that to the best of my knowledge and belief the information contained in the Licensee's online record, as well as any applicable jurisdiction specific requirements, is true, accurate and complete in accordance with the appropriate jurisdiction's law.

Additionally, I acknowledge that I have a duty and agree expediently to update and correct the information as it changes.

I understand that submitting any false or misleading information, or omitting pertinent or material information, may be grounds for administrative action and/or criminal action.

As part of this request for license/registration renewal, I swear or affirm to the following:

- The Licensee is in compliance with Montana's surety bond (or approved alternative) requirement in 32-7-109, MCA. (Escrow Company License only)
- The Licensee remains in good standing with the Montana Secretary of State office.
- The Licensee is abiding by all terms and conditions of any order or disciplinary agreement in effect in any jurisdiction.
- I acknowledge that I understand and will comply with the laws and regulations of Montana pertaining to the conduct of the business for which the Licensee is requesting the renewal of such license/registration.
- The Licensee has updated the documents on file with Montana to disclose any new event or proceeding requiring an affirmative answer to any Disclosure Questions which has occurred since the Licensee submitted its license/registration application or renewal application to the Montana. Any documents explaining affirmative answers to any Disclosure Questions previously submitted by the Licensee to each jurisdiction(s) remain true and accurate.

I verify that I am the named person above and agree to the language as stated.

Name _____

Signature _____

Date _____