



STATE OF MONTANA • DEPARTMENT OF ADMINISTRATION  
**DIVISION OF BANKING AND FINANCIAL INSTITUTIONS**  
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## **MORTGAGE LOAN ORIGINATOR RENEWAL FORM**

*Required for Montana MLO license applicants who wish to be licensed during renewal period (Nov. 1 - Dec. 31).  
Applications received during this time period will be automatically placed on hold until January unless this form is submitted.*

I, \_\_\_\_\_ (individual name), NMLS number \_\_\_\_\_, swear (or affirm) on \_\_\_\_\_ (date) that to the best of my knowledge and belief the information contained in my online record, including jurisdiction specific requirements where I am licensed or registered, is true, accurate and complete in accordance with the appropriate jurisdiction's law.

Additionally, I acknowledge that I have a duty and agree to expediently 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:

- I affirm/attest that I meet the Montana financial responsibility requirements.
- I affirm/attest that I am 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 all Montana laws and regulations pertaining to the conduct of the business for which the Licensee is requesting the renewal of such license or registration.
- I affirm/attest that I have updated the documents on file with Montana to disclose any new event or proceeding requiring an affirmative answer to any Disclosure Question which has occurred since submission of my license/registration application or renewal application to Montana. Any documents explaining affirmative answers to any Disclosure Questions previously submitted to each jurisdiction(s) remain true and accurate.

I certify that I grant permission to Montana to verify information with any state, federal, or local government agency, and current/former employers.

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

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

Please email completed form to [mortgagelicensing@mt.gov](mailto:mortgagelicensing@mt.gov).

The application must be submitted in NMLS first before returning this form.

By submitting this form, you agree to pay the renewal fee by 12/31 or your license will be terminated on January 2<sup>nd</sup>. The fee will be invoiced through NMLS.