



JIM GIBBONS
Governor

STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF MORTGAGE LENDING
400 W. King Street, Suite 101
Carson City, NV 89703
(775) 684-7060 Fax (775) 684-7061
www.mld.nv.gov

DIANNE CORNWALL
Director

JOSEPH L. WALTUCH
Commissioner

APPLICATION TO CHANGE COMPANY LICENSE TYPE

Mail to: Division of Mortgage Lending
400 W. King Street, Suite 101
Carson, NV 89703

Company Information:

License No.: _____

Name of Company: _____

Address of Principal Nevada Location: _____

		Street Address
		NV
City	State	Zip

Application is hereby made for a change of our license type from:

- Mortgage Broker to Mortgage Banker
- or
- Mortgage Banker to Mortgage Broker

Enclosed are the following:

- \$500.00** non-refundable renewal fee for the principal office
- \$100.00** non-refundable fee for each branch office
- Copy of the most recent financial statement prepared by a Nevada-licensed certified public accountant
- Child Support Statement for each owner of the company, each person who has the power to direct the management and policy of the company and qualified employee of the company. (Pursuant to NRS 645B.023 and NRS 645E.210, required regardless of any support obligations.)

I, the undersigned, state that I am the owner or qualified employee of the licensed company named in this Application to Change Company License Type. By signing below, I represent that I personally have completed this Application to Change Company License Type and verified the information contained herein and have the authority to make these representations on behalf of the licensed company.

Signature of Owner or Qualified Employee: _____

Name (print or type): _____

Title: _____ Date: _____

Original or "wet" signature required.