



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 FOR MORTGAGE BANKER LICENSE,
CHECKLIST AND GENERAL INFORMATION**

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

The undersigned hereby makes application to the Commissioner of the Division of Mortgage Lending for a license to engage in the mortgage banker business pursuant to NRS 645E.

Corporate Name: _____

DBA, if applicable: _____

Proposed Nevada Location (List "pending" if not known):

 Street Address City State Zip

Telephone No.: _____ Fax No.: _____
 (Must be a Local Land Line)

E-Mail: _____ Taxpayer Identification No.: _____
 (Mandatory)

Name of Qualified Employee (The mortgage banker must designate a QE at the time of application. NAC 645E.310):

Contact Person for Application Process: _____

Contact Person's Mailing Address: _____
 Street Address

 City State Zip

Contact Telephone No.: _____ Contact Fax No.: _____
 (Must be a Local Land Line)

Please indicate in which states the applicant is currently licensed to conduct mortgage lending activities:

State	Institution Name	License No.	Expiration Date

Required Items – Checklist:

- Child Support Statement from each natural person with an ownership interest in the company, each person who has the power to direct the management and policy of the company and the proposed qualified employee. (Pursuant to NRS 645E.210, required regardless of any support obligations.)
- Personal History Record (including an explanation of “Yes” answers) completed, signed and notarized for each natural person who owns a 25% or more interest in the company, each person who has the power to direct the management and policy of the company and the proposed qualified employee.
- Personal Financial Questionnaire completed, signed and notarized for each natural person who owns a 25% or more interest in the company, each person who has the power to direct the management and policy of the company and the proposed qualified employee.
- Non-Personal History Record (including an explanation of “Yes” answers) completed, signed and notarized, for the company and for each entity that owns a 25% or more interest in the company.
- Two fingerprint cards completed by each owner of the company, each person who has the power to direct the management and policy of the company and the proposed qualified employee. (Cards are available at local law enforcement agencies. Only Form FD-258 will be accepted.)
- Current Financial Statement for the company and for each entity that owns 25% or more interest in the company, including a balance sheet and profit and loss statement (prepared within the last 3 months), if applicable, and the two most recent fiscal year end financial statements (not applicable for newly formed companies).
- Include a general business plan and a description of the policies and procedures that the mortgage banker and his agents will follow to arrange and service loans and to conduct business pursuant to Chapter 645E of NRS.
- (QE Only) The proposed qualified employee must provide proof of two years’ mortgage business experience and managerial experience or applicable education. Proof may consist of W-2’s or 1099 forms.
- A letter from the proposed qualified employee’s prior employers or other supporting documentation detailing the proposed qualified employee’s duties and experiences related to his prior employment.
- \$1,500.00** non-refundable application fee. (Make check payable to “Division of Mortgage Lending.”)

I acknowledge that all documents filed in connection with this Application for Mortgage Banker License are deemed to be public records, unless provided otherwise in the law, and open to public inspection.

I, the undersigned, state that I am authorized to sign the within Application for Mortgage Banker License on behalf of the applicant named herein; that I have read and signed said Application for Mortgage Banker License and know the contents thereof; and that the statements made therein are true. By signing below and initialing each page, I represent that I personally have completed this Application for Mortgage Banker License and verified the information contained herein.

Name of Applicant: _____
(Mortgage Banker)

By: _____
Authorized Signatory (Owner)

Printed Name: _____

Date: _____

Subscribed and sworn to before me the _____ day of _____, 20____

Notary public in and for the County of _____, State of _____

My commission expires _____

Notary Signature _____

Notary Seal

GENERAL INFORMATION

The Division of Mortgage Lending will only accept:

- Current application documents posted on website
- Legible, completed forms
- Complete application packets

Make all checks payable to "Division of Mortgage Lending." The Division is not able to accept electronic payments at this time. Please do not send cash. Money orders are permitted, but not recommended.

Completed application packages are to be mailed to:

Division of Mortgage Lending
400 W. King Street, Suite 101
Carson City, NV 89703

The application fee is non-refundable. Before you complete and submit the application for a mortgage banker license, please read the following instructions to determine the ability to comply with all requirements.

Application: To apply for licensing, complete all required forms. All forms are on the Division's website at <http://mld.nv.gov/Forms.htm>. Do not leave any questions unanswered. If a question does not apply to you or if, the answer to the question is 'none,' this must be stated on the application. Outdated, incomplete and illegible applications will be returned. It is your responsibility to maintain photocopies of all documents submitted. The Division will not provide copies of submitted documents.

Original or "wet" signatures are required on all Division documents. All pages must be submitted on 8 ½ x 11" paper. White-outs and/or correction tape is/are not permitted.

In submitting an application to the State of Nevada Division of Mortgage Lending, please be aware of the following requirements:

Applicant's Name: The applicant's name must be identical on all forms.

Upon completion of the background investigation, the Division will issue a conditional letter of approval as well as a memo for the Secretary of State to allow registration of the company.

Company Name Prohibitions: The Division will not issue a license or certificate of exemption with a name that is the same as or confusingly similar to a name on a license or certificate of exemption previously issued by the Division. Further, you cannot conduct business using a name other than the name approved by the Division and indicated on the license or certificate of exemption issued by the Division to you.

Other Application Requirements:

Qualified Employee Qualifications: In order to qualify for the license, the QE:

- Must be a Nevada resident domiciled in Nevada during the term as QE.
- Have not less than two (2) years' verifiable mortgage lending experience. The Division will consider a QE to have the required experience if the experience includes taking loan applications from borrowers, determining the borrower's ability to repay a mortgage loan, discussing loan options, quoting rates, and if applicable to the business, discussing investment options with investors placing monies into loans secured by real property. A QE must have a general knowledge of state and federal laws, including RESPA (Real Estate Settlement Procedures Act) and TILA (Truth in Lending Act).
- Additionally, the applicant must demonstrate that the QE has experience or appropriate educational training in bookkeeping and/or managing an office.

The Division will consider a QE to have the required experience if the experience includes taking loan applications from borrowers, determining the borrower's ability to repay a mortgage loan, discussing loan options, quoting rates, and if applicable to the business, discussing investment options with investors placing monies into loans secured by real property. A QE must have a general knowledge of state and federal laws including RESPA (Real Estate Settlement Procedures Act) and TILA (Truth in Lending Act). Additionally, the applicant must demonstrate that the QE has experience or appropriate educational training in bookkeeping and/or managing an office.

The QE must supervise the agents in the office for which a license is sought on a full-time basis. **The QE must reside within a commutable distance from the licensed location.**

Required Documentation Upon Receipt of Conditional Letter of Approval:

The following information must be submitted within 30 days **after** the Division has issued the conditional letter of approval. The Division will also provide approval memos for filing with the Secretary of State and municipal business license authority. These approvals will not be provided in advance of the conditional approval.

1. **\$1,000.00** non-refundable initial license fee;
2. Copy of State Business License from the Department of Taxation pursuant to NRS 364A, (www.tax.state.nv.us);
3. Municipal Business License;
4. Copy of recorded Certificate of Fictitious Name, if applicable;
5. Certificate of Good Standing issued by the Nevada Secretary of State (www.sos.state.nv.us), list of officers and Articles of Incorporation/LLC/Partnership.
6. Any other documentation deemed necessary by the Commissioner.

Processing Time: Please allow a minimum of 10 weeks for completion of the background investigation. The total time required to process an application is dependent upon the completeness and accuracy of the forms submitted. If the submitted forms are not properly completed, they will be returned to you. If your application is returned, or if the Licensing Department of the Division requests additional information, your prompt response will help reduce the processing time. If you fail to provide the necessary information requested within the time frame prescribed by law, your license application will be withdrawn and you will have to reapply.

Please Remember:

A license granted by the Division entitles you to engage only in that particular business for which the license is issued. Be advised that adherence to and compliance with all applicable statutes and regulations is the responsibility of the mortgage banker. Statutes and regulations may be found on the Division's website, mld.nv.gov. All fees charged are authorized, pursuant to NRS 645E.280.

You cannot solicit investors or potential borrowers or conduct mortgage banker activity until you have been licensed by the Division. Once licensed, these activities can only be conducted for the location at which you have been licensed.

Shared Premises:

Although there are additional requirements for sharing premises with a real estate company, which are covered below, a mortgage banker may share office space with another business if the Division finds that the space is suitable for the activities of the businesses. Additionally, each business must have a designated space within the office space and each business must be separately identifiable by a sign or other method of identification within the office space. A company licensed pursuant to NRS 645B may share premises with a commonly owned entity licensed under NRS 645E (bankers).

A mortgage banker may share office space with a real estate company if:

- Each business has separate and distinct office space and signs such that a reasonable customer would understand which business he is transacting with at all times
- Each business operates as a separate legal entity and maintains separate licenses
- Each business maintains separate accounts, books and records
- The businesses are subsidiaries of the same parent corporation or are otherwise affiliated businesses under common control

Advertisements:

A mortgage banker must include in his advertisements, including any advertising material available on the Internet:

- The complete name of the mortgage banker or the complete name under which the mortgage banker does business;
- The address and telephone number that the mortgage banker has on file with the Division. Additional telephone or cellular phone numbers of the mortgage banker may also be included; and
- A description of any licensed activity mentioned in the advertisement, written in non-technical terms.

Applicants acknowledge that they must comply with all applicable state and federal laws and regulations, the requirements set forth herein and any other conditions requested by the Commissioner prior to issuance of a license.



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CHILD SUPPORT STATEMENT

You are required to complete this Child Support Statement and return it with your application. **Failure to submit a fully completed and signed Child Support Statement will result in the application for licensing being denied.** NRS 425.520, 645A.025, 645B.023, 645B.420 and 645E.210.

Please check one box:

- I am **not** subject to a court order for the support of a child.
- I **am** subject to a court order for the support of one or more children and **am in compliance** with the order or I am in compliance with a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.
- I **am** subject to a court order for the support of one or more children and **am not in compliance** with the order or a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Applicant's Name (printed)

Social Security Number

Signature of Applicant

Date



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**PERSONAL HISTORY RECORD – MORTGAGE BANKER
(Submit For Natural Persons)**

This Personal History Record – Mortgage Banker (Submit For Natural Persons) is to be completed by each natural person who owns a 25% or more interest in the company, each person who has the power to direct the management and policy of the company and the proposed qualified employee. Please indicate the natural person for whom this form is being submitted:

- Person who owns a 25% or more interest in the company
- Person who has the power to direct the management and policy of the company
- Proposed qualified employee

Print or type an answer to every question. If a question does not apply, please mark the section N/A for not applicable. If there is not enough space to answer the question sufficiently, continue on the Explanation Form and mark each answer with the corresponding number of the question. However, attachments are only permitted if additional space is needed. Do not misstate or omit any material fact(s). Such statements made herein are subject to verification. Incomplete applications will be returned.

The applicant must initial each page in the lower right hand corner. By placing his/her initials on each page, the applicant is attesting to the accuracy and completeness of the information contained on that page. Original or “wet” signatures are required on all Division documents. All pages must be submitted on 8 ½ x 11” paper. White-out and/or correction tape is/are not permitted.

Applicants are advised that this Personal History Record is an official document and misrepresentations or failure to disclose information requested may be deemed sufficient cause for the denial or revocation of a license.

Applicant’s Full Legal Name: _____
First Middle Last

Applicant’s Residence Address: _____
Address City State Zip

Residence Phone: _____ Business Phone: _____ Cell: _____

Gender: _____ Hair Color: _____ Eye Color: _____ Height: _____ Weight: _____

Birthdate: _____ Birthplace: _____

Social Security No.: _____ Nevada Driver’s License No.: _____

(submit copy) or Other State Driver’s License No.: _____ (submit copy)

Name and address of the company for which licensing affiliation is requested:

Name of Company

Address of Company:

Address City State Zip

1. Residential Addresses For The Last 10 Years (beginning with the most recent). (If additional space is required, use the Explanation Form. All "gaps" in residential address information must be explained.)

From	To	Street	City	State	Zip
	Present				

Note: Attach separate sheet if additional space is needed.

Are you a citizen of the United States? Yes ____ No ____

If no, Registration No.: _____

If naturalized, Certificate No.: _____ Date: _____

If you are not a citizen of the United States, or if you are not naturalized, provide documentation evidencing your eligibility to work in the United States. (Submit copy of resident alien card)

List of other names known by, such as maiden name, nickname, etc.

2. Employment (If additional space is required, use the Explanation Form. All lapses of time must be explained.) Beginning with your current employment, list your work history, all businesses with which you have been involved and/or periods of unemployment for the **last 10 years**. List all corporations, partnerships or any other business ventures with which you have been associated as an officer, director, stockholder or related capacity.

From	To	Employer Name and Address	Job Title and Duties Performed
	Present		

Note: Attach separate sheet if additional space is needed.

3. Disclosure Items

You are **required** to provide an explanation for ‘yes’ answers to the questions below. Include the date, charge, agency, location, disposition and explanation, as applicable. Please complete the attached Explanation Form if additional space is needed.

**INACCURACIES OR OMISSIONS MAY RESULT IN DENIAL OR DELAY
IN PROCESSING YOUR APPLICATION**

- a. Have you ever been charged, arrested, convicted of, or pled guilty or nolo contendere (“no contest”) to any felony or misdemeanor?

Yes No

If the answer is “Yes,” please explain in detail all charges, arrests and convictions, including the jurisdictions and dispositions. Include any sealed or expunged convictions.

- b. At any time preceding the date of this application, have you ever been charged, arrested, convicted of, or pled guilty or nolo contendere (“no contest”) to any felony or misdemeanor involving fraud, dishonesty, breach of trust, money laundering, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?

Yes No

If the answer is “Yes,” please explain in detail all charges, arrests and convictions, including the jurisdictions and dispositions. Include any sealed or expunged convictions.

- c. Have you ever entered into any settlement agreement, whether civil or criminal, with any federal or state agency?

Yes No

If the answer is “Yes,” give details:

- d. Have you or any company in which you have ever held an ownership interest (other than an ownership interest in a publicly-traded company) had a license or registration denied, suspended or revoked by any agency in this state or any other state, district, territory of the United States or any foreign court in the preceding 10 years?

Yes No

If the answer is “Yes,” give details:

- e. Have you within the past 10 years made a compromise with creditors, filed a personal bankruptcy petition or been the subject of a voluntary or involuntary bankruptcy petition for an organization while you exercised control over it or held an ownership interest (other than an ownership interest in a publicly-traded company) in it?

Yes No

If the answer is “Yes,” give details:

- f. Has a bonding company ever denied, paid out on, or revoked a bond for you or any company in which you have ever held an ownership interest (other than an ownership interest in a publicly-traded company) or over which you have exercised control?

Yes No

If the answer is “Yes,” give details:

- g. Do you or any company in which you have ever held an ownership interest (other than an ownership interest in a publicly-traded company) or over which you have exercised control have any unsatisfied judgments or liens?

Yes No

If the answer is "Yes," give details:

- h. Do you have a relative that is or has been associated with the mortgage lending industry in any state? (Under NRS 645B.0131, "relative" means a spouse or any other person related within the second degree by blood or marriage.)

Yes No

If the answer is "Yes," give details:

- i. Have you or any company in which you have ever held an ownership interest (other than an ownership interest in a publicly-traded company) or over which you have exercised control had a civil or criminal record expunged or sealed by a court order?

Yes No

If the answer is "Yes," give details:

- j. Have you ever had conditions placed upon a privileged or professional license or had a privileged or professional license denied, suspended or revoked by any local, state, federal or other regulatory entity?

Yes No

If the answer is "Yes," give details:

- k. Have you or any company in which you have ever held an ownership interest (other than an ownership interest in a publicly-traded company) or over which you have exercised control been a party to any past or present civil litigation?

Yes No

If the answer is "Yes," give details:

l. Within the last 12 months, have you been past due on financial obligations which total more than \$3,000.00?

Yes No

If the answer is "Yes," give details:

m. Are you subject to any pending actions that could result in a 'yes' answer to any of the above questions?

Yes No

If the answer is "Yes," give details:

EXPLANATION FORM (Use this form for explanation and additional space needed to answer questions.) Copies of this page can be made if more space is needed.

Question Number	Explanation

**BACKGROUND CHECK AUTHORIZATION, RELEASE
AND AGREEMENT TO INDEMNIFY**

By my signature below, I hereby give to the State of Nevada, its directors, officers, employees, agents and representatives (collectively, "the State"), my written consent to obtain credit reports and child support information on me and to conduct criminal history and background checks on me, pursuant to applicable law and/or as the Commissioner of the Division of Mortgage Lending ("the Division"), in his sole discretion, may from time to time deem necessary or appropriate. In connection with the criminal history and background checks on me, I understand that I am required, and agree, to provide to the Division a complete set of fingerprints which the Division will forward to the Department of Public Safety for processing and submission to the Federal Bureau of Investigation for its report.

I have filed with the Division an "application" under Chapter 645A, B or E of the Nevada Revised Statutes ("NRS") to be licensed or request for approval as a mortgage banker, mortgage broker, mortgage agent, escrow agency, escrow agent, qualified employee or key officer/director/majority owner, as applicable. I understand that I am seeking the granting of a privilege and acknowledge that the burden of providing my qualifications for a favorable determination is at all times on me. I accept any risk of adverse public notice, embarrassment, criticism or other action or financial loss which may result from action with respect to this application.

I do, for myself, my spouse, heirs, executors, administrators, successors and assigns, hereby irrevocably and unconditionally release, remise and forever discharge the Commissioner of the Division, the Division, the State, its boards, divisions, departments, directors, officers, employees, agents, representatives, and all persons acting by, through, under or in concert with any of them, from and against any and all claims, causes of action, damages, demands, debts, judgments, liens, rights, suits, controversies, losses, costs and expenses (including, but not limited to, attorney's fees and costs) (collectively, "claims") of any nature whatsoever, whether known or unknown, suspected or unsuspected, fixed or contingent, in law or equity, which I ever had, now have, may have, or claim to have, arising out of, or in connection with, the within application.

I agree to indemnify and hold harmless the Commissioner of the Division, the Division, the State, its boards, divisions, departments, directors, officers, employees, agents, representatives, and all persons acting by, through, under or in concert with any of them, from and against all claims, damages, losses and expenses (including attorney's fees and costs) arising out of or in connection with the within application.

I, the undersigned, state that I am the person named in the within Personal History Record – Mortgage Banker; that I have read and signed said Personal History Record – Mortgage Banker and know the contents thereof; and that the statements made therein are true. By signing below and initialing each page, I represent that I have personally completed this Personal History Record – Mortgage Banker and verified the information contained therein and have read and agree to the above investigations into my credit history and child support information, and criminal history and background checks.

Signature: _____

Name (print or type)

Date

Subscribed and sworn to before me this _____ day of _____, 20__

Notary public in and for the County of _____, State of _____

My commission expires _____

Notary Signature _____

Notary Seal



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DIANNE CORNWALL
Director

JOSEPH L. WALTUCH
Commissioner

NON-PERSONAL HISTORY RECORD – MORTGAGE BANKER
(Submit For Other Than Natural Persons)

This Non-Personal History Record – Mortgage Banker (Submit For Other Than Natural Persons) is being submitted in connection with an application for a mortgage banker license. This form is to be completed by the applicant and each entity that owns a 25% or more interest in the applicant/company. Please indicate for whom this form is being submitted:

- Applicant/company
- Entity that owns a 25% or more interest in the applicant/company

Print or type an answer to every question. If a question does not apply, please mark the section N/A for not applicable. If there is not enough space to answer the question sufficiently, continue on the Explanation Form and mark each answer with the corresponding number of the question. Do not misstate or omit any material fact(s). Such statements made herein are subject to verification. Incomplete applications will be returned.

The applicant must initial each page in the lower right hand corner. By placing his/her initial on each page, the applicant is attesting to the accuracy and completeness of the information contained on that page. Original or “wet” signatures are required on all Division documents. All pages must be submitted on 8 ½ x 11” paper. White-out and/or correction tape is/are not permitted.

Applicants are advised that this Non-Personal History Record is an official document and misrepresentations or failure to disclose information requested may be deemed sufficient cause for the denial or revocation of a license.

Name of Applicant: _____

List any dba’s of the entity if not the corporate name: _____

License No.: _____

Address of Principal Place of Business in Nevada: _____
Street Address
NV
City State Zip

Telephone No.: _____ E-Mail: _____
(Must be a Local Land Line)

Fax No.: _____ Taxpayer Identification No.: _____
(Mandatory)

1. If the applicant is a corporation, provide a copy of the by-laws and a current Certificate of Good Standing from the state of incorporation.
2. List all owners of the entity, each principal, officer, director, trustee, general partner and managing member of the entity, and all individuals with the power to direct management or policy or control through ownership, contractual or otherwise.

Owner's Name	Title/Position	Residence Address	Percentage Held Owner/Officer/Director/ Stockholder (% of Ownership Interest Must Equal 100%)

For each individual listed above, a Personal History Record, Child Support Statement and two completed fingerprint cards must be submitted. (Cards are available at local law enforcement agencies. Only Form FD-258 will be accepted.)

3. Arrests, Detentions, Litigation and Disclosure Items

An explanation for 'yes' answers is **required**. Include the date, charge, agency, location, disposition and explanation, as applicable. Please complete the attached Explanation Form if additional space is needed.

**INACCURACIES OR OMISSIONS MAY RESULT IN DENIAL OR DELAY
IN PROCESSING YOUR APPLICATION**

- a. Has any owner, officer or director of the entity ever been charged, arrested, convicted of, or pled guilty or nolo contendere ("no contest") to any felony or misdemeanor?

[] Yes [] No

If the answer is "Yes," please explain in detail all charges, arrests and convictions, including the jurisdictions and dispositions. Include any sealed or expunged convictions.

- b. At any time preceding the date of this application, has any owner, officer or director of the entity ever been charged, arrested, convicted of or pled guilty or nolo contendere (“no contest”) to any felony or misdemeanor involving fraud, dishonesty, breach of trust, money laundering, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?

Yes No

If the answer is “Yes,” please explain in detail all charges, arrests and convictions, including the jurisdictions and dispositions. Include any sealed or expunged convictions.

- c. Has the entity ever entered into any settlement agreement, whether civil or criminal, with any federal or state agency?

Yes No

If the answer is “Yes,” give details:

- d. Has the entity or any company in which the entity has ever held an ownership interest (other than an ownership interest in a publicly-traded company) or over which the entity has exercised control ever had a license or registration denied, suspended or revoked by any agency in this state or any other state, district, territory of the United States or any foreign court in the preceding 10 years?

Yes No

If the answer is “Yes,” give details:

- e. Has the entity within the past 10 years made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition for an organization while the entity exercised control over it or held an ownership interest (other than an ownership interest in a publicly-traded company) in it?

Yes No

If the answer is “Yes,” give details:

- f. Has a bonding company ever denied, paid out on, or revoked a bond for the entity or any company in which the entity is or has ever been an owner or over which the entity has exercised control?

Yes No

If the answer is “Yes,” give details:

- g. Does the entity or any company in which the entity has ever held an ownership interest (other than an ownership interest in a publicly-traded company) or over which the entity has exercised control have any unsatisfied judgments or liens?

Yes No

If the answer is "Yes," give details:

- h. Does any owner, officer or director of the entity have a relative who is or has been associated with the mortgage lending industry in any state? (Under NRS 645, "relative" means a spouse or any other person related within the second degree by blood or marriage.)

Yes No

If the answer is "Yes," give details:

- i. Has the entity or any company in which the entity has ever held an ownership interest (other than an ownership interest in a publicly-traded company) or over which the entity has exercised control had a civil or criminal record expunged or sealed by a court order?

Yes No

If the answer is "Yes," give details:

- j. Has the entity ever had conditions placed upon a privileged or professional license or had a privileged or professional license denied, suspended or revoked by any local, state, federal or other regulatory entity?

Yes No

If the answer is "Yes," give details:

- k. Has the entity or any company in which the entity ever held an ownership interest (other than an ownership interest in a publicly-traded company) or over which the entity has exercised control been a party to any past or present civil litigation?

Yes No

If the answer is "Yes," give details:

l. Is the entity subject to any pending actions that could result in a 'yes' answer to any of the above questions?

Yes No

If the answer is "Yes," give details:

m. Is the entity approved by HUD?

Yes No

EXPLANATION FORM (Use this form for explanation and additional space needed to answer questions.) Copies of this page can be made if more space is needed.

Question Number	Explanation

I, the undersigned, state that I am authorized to sign the within Non-Personal History Record – Mortgage Banker on behalf of the applicant named herein; that I have read and signed said Non-Personal History Record – Mortgage Banker and know the contents thereof; and that the statements made therein are true. By signing below and initialing each page, I represent that I personally have completed this Non-Personal History Record – Mortgage Banker and verified the information contained herein.

APPLICANT'S SIGNATURE:

Name of Applicant: _____

By: _____
Authorized Signatory

Name (print or type)

Title

Date

Or:

ENTITY OWNING 25% OR MORE INTEREST IN THE APPLICANT/COMPANY:

Name of Entity: _____

By: _____
Authorized Signatory

Name (print or type)

Title

Date

Subscribed and sworn to before me this ____ day of _____, 20____

Notary public in and for the County of _____, State of _____

My commission expires _____

Notary Signature _____

Notary Seal



JIM GIBBONS
Governor

STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
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DIANNE CORNWALL
Director

JOSEPH L. WALTUCH
Commissioner

PERSONAL FINANCIAL QUESTIONNAIRE – MORTGAGE BANKER

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

A Personal Financial Questionnaire is to be completed by each natural person who owns a 25% or more interest in the company, each person who has the power to direct the management and policy of the company and the proposed qualified employee. Please indicate the natural person for whom this form is being submitted:

- Person who owns a 25% or more interest in the company
- Person who has the power to direct the management and policy of the company
- Proposed qualified employee

This form is not made part of the public record of the application. Financial statements submitted pursuant to NRS 645B.085 and NRS 645E.360 are public information.

Applicant must initial each page in the owner right-hand corner. By placing his/her initials on each page, the applicant is attesting to the accuracy and completeness of the information contained on that page. Original or "wet" signatures are required on all Division documents. All pages must be submitted on 8-1/2 x 11" paper. White-outs and/or correction tape is/are not permitted.

Name of person completing this document: _____			
First	Middle	Last	
Name of entity for which licensing affiliation is requested: _____			

Address of Principal Place of Business: _____			
Street Address			
City		State	Zip
Telephone No.: _____		Fax No.: _____	
(Must be a Local Land Line)			
E-Mail: _____			
(Mandatory)			

STATEMENT OF ASSETS

As Of _____ (Insert Date)¹

	<u>Balance</u>
Cash on Hand.....	\$ _____
Checking Account.....	\$ _____
Checking Account.....	\$ _____
Savings Account.....	\$ _____
Savings Account.....	\$ _____
Accounts and Notes Receivable ²	\$ _____
Description: _____	
Accounts and Notes Receivable ³	\$ _____
Description: _____	
Accounts and Notes Receivable ⁴	\$ _____
Description: _____	
Other Current Assets.....	\$ _____
Description: _____	
Investments: Stocks, Bonds, etc.....	\$ _____
Description: _____	
Fixed Assets (less depreciation).....	\$ _____
Description: _____	
Other Assets (automobiles, personal property, etc.).....	\$ _____
Description: _____	
TOTAL ASSETS:	\$ _____

¹ Attach additional sheet if necessary.

² Must attach evidence.

³ Must attach evidence.

⁴ Must attach evidence.

STATEMENT OF LIABILITIES
Current Liabilities⁵

	<u>Balance</u>
Accounts Payable (credit cards, etc.).....	
Description: _____	\$ _____
Description: _____	\$ _____
Description: _____	\$ _____
Notes Payable (list each lender separately).....	
Lender: _____	\$ _____
Description of Collateral: _____	\$ _____
Lender: _____	\$ _____
Description of Collateral: _____	\$ _____
Lender: _____	\$ _____
Description of Collateral: _____	\$ _____
Lender: _____	\$ _____
Description of Collateral: _____	\$ _____
Lender: _____	\$ _____
Description of Collateral: _____	\$ _____
Taxes Payable.....	\$ _____
Other Liabilities.....	\$ _____
Description: _____	
Other Liabilities.....	\$ _____
Description: _____	
Other Liabilities.....	\$ _____
Description: _____	
TOTAL LIABILITIES:	\$ _____
NET WORTH (Total Assets Minus Total Liabilities).....	\$ _____
Amount to be invested in business.....	\$ _____
Percentage of ownership represented by investment.....	\$ _____

I, the undersigned, state that I am authorized to sign the within Personal Financial Questionnaire – Mortgage Banker on behalf of the applicant for a mortgage banker license; that I have read and signed this Personal Financial Questionnaire – Mortgage Banker and know the contents thereof; and that the statements made therein are true. By signing below and initialing each page, I represent that I personally have completed this Personal Financial Questionnaire – Mortgage Banker and verified the information contained herein.

Further, I understand that this Personal Financial Questionnaire – Mortgage Banker is an official document and misrepresentations or the failure to disclose information requested may be deemed

⁵ Attach additional sheet if necessary.

sufficient cause for the denial of a license. I am aware that the later discovery of an omission or misrepresentation made in this Personal Financial Questionnaire – Mortgage Banker may be grounds for the revocation of a license.

Signature: _____

Name (print or type)

Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____

Notary public in and for the County of _____, State of

My commission expires _____

Notary Signature _____

Notary Seal



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

DESIGNATION OF QUALIFIED EMPLOYEE

(Use This Form For Initial License Submissions
And For Any Subsequent Changes in the QE)

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

The undersigned hereby makes application to the Commissioner of the Division of Mortgage Lending for designation as the qualified employee for a mortgage banker.

Qualified Employee Information:

Name: _____				
First	Middle	Last		
Home Address: _____				
Street	City	State	Zip	
Social Security No.: _____		Telephone No.: _____		
Is the proposed qualified employee an owner of the company? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Mortgage Banker Information: (Indicate the office location at which the QE will work)

Mortgage Banker Name: _____				
License No.: _____				
Address: _____				
Street	City	State	Zip	
Telephone No.: _____		E-Mail: _____		
(Must be a Local Land Line)		(Mandatory)		
Fax No.: _____				

Required Items – Proposed Qualified Employee - Checklist:

(Forms available on the Division’s website, mld.nv.gov)

- Child Support Statement completed by the proposed QE. (Pursuant to NRS 645E.210, required for all submissions regardless of any support obligations.)
- Personal History Record (including an explanation of “Yes” answers) completed and signed by the proposed QE and notarized.
- Two fingerprint cards completed by the proposed QE. (Cards are available at local law enforcement agencies. Only Form FD-258 will be accepted.)
- Verification of two years’ employment in mortgage lending (W-2, 1099 and a letter from a past or current employer of the proposed QE, including duties performed or evidence of licensing in another state).

I declare under penalty of perjury that I have read the foregoing and it is true to the best of my knowledge and belief.

Signature of Proposed Qualified Employee: _____

Print Name of Proposed Qualified Employee: _____

Signature of Principal Officer: _____

Print Name of Principal Officer: _____

Date: _____

Original or “wet” signatures required.