

STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF MORTGAGE LENDING

1830 College Parkway, Suite 100
Carson City, NV 89706
(775) 684-7060 Fax (775) 684-7061
www.mld.nv.gov

DESIGNATION OF QUALIFIED EMPLOYEE

A “**qualified employee**” is a natural person that is designated by a licensed mortgage broker to supervise and oversee the mortgage broker’s business and mortgage agents at the location for which he or she is the qualified employee.

A natural person designated as a qualified employee must:

1. Be approved by the commissioner to serve as a qualified employee for the licensed mortgage broker or mortgage banker.
2. Be a licensed mortgage agent in good standing.
3. Be present at the licensed office location for which he or she is the qualified employee the majority of the time that the office is open to the public.

The undersigned hereby makes application to the Commissioner of the Division of Mortgage Lending for designation of a qualified employee as follows:

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

Mortgage Broker Mortgage Banker

Mortgage Broker or Mortgage Banker Licensee Name:

MLD License No.: _____ NMLS ID No.: _____

Address: _____
Street City State Zip

Telephone No.: _____ E-Mail: _____
(Mandatory)

Fax No.: _____

Qualified Employee Information:

Name: _____
First Middle Last

MLD License No.: _____ NMLS ID No.: _____

Home Address: _____
Street City State Zip

Social Security No.: _____

Telephone No.: _____ E-Mail: _____

Is the proposed qualified employee an owner of the company? Yes No

I, the undersigned, state that I am authorized to sign the within Designation of Qualified Employee on behalf of the Licensee named herein; that I have read and signed said Designation of Qualified Employee and know the contents thereof; and that the statements made therein are true. By signing below, I represent that I have personally completed this Designation of Qualified Employee and verified the information contained herein.

Name of Licensee: _____
(Mortgage Broker or Mortgage Banker)

By: _____ Printed Name: _____
Authorized Signatory (Owner or Principal Officer)

Date: _____

Original or "wet" signature required.

Mail form to address shown at top of form.