



FOR DEPARTMENT USE ONLY

LICENSE NUMBER _____

MTG SC

STATE OF MISSISSIPPI

Department of Banking and Consumer Finance, Mortgage Division
901 Woolfolk Building, Suite A; 501 N West Street
Post Office Box 23729 (39225-3729)
Jackson, Mississippi 39201

Stockholder Change Application

Application is hereby made for a license pursuant Section 81-18-1, et seq., Mississippi Code of 1972, Annotated.

1. NAME OF APPLICANT: _____

Legal Name of Company

_____ d/b/a of company doing business in Mississippi (if applicable)

2. BUSINESS ADDRESS OF MAIN OFFICE: (licensed address)

Street _____ P.O. Box _____

County _____ City _____

State _____ ZIP _____

BUSINESS TELEPHONE: _____

(_____) _____ FAX (_____) _____

NMLS Number: _____

DBCF License Number: _____

3. CURRENT FORM OF ORGANIZATION AS LICENSED WITH DEPARTMENT: _____

(Sole proprietorship, partnership, L.L.C., L.L.P., or corporation)

- a. Is the type or form of incorporation changing? _____
- b. Attach stamped, filed copies of the acknowledgement of the change of ownership with the Mississippi Secretary of State's Office. If the company has not been previously registered, then submit the two required forms as notated in the Initial Mortgage Company Application. These forms **MUST** accompany application.

(over)

4. The legal name, residence, and percentage ownership of each person owning 10% or more of the company. Each of these individuals **MUST** provide a fingerprint card with the application for a background check.

Legal Name	Residence, City, State, Zip	Percentage of Ownership In Company

5. Name of person who is to have charge of the business under this license:

_____ Phone: (____) _____

6. Is the applicant currently, or has the applicant ever been, licensed or conducted business as a mortgage company in any other state(s)? _____ If currently licensed or conducting business, please list the state(s) and the name and address of the regulatory agency. If not currently licensed or conducting business, but have in the past, please list the state(s) and the name and address of the regulatory agency, and add the time periods the applicant was licensed or conducted business. _____

7. Has applicant, or any partner, director or principal officer of the applicant, licensed under similar acts of other states had such license revoked, denied or suspended? _____ (If yes, explain on a separate sheet).

8. Has applicant, or any partner, director or principal officer of the applicant ever been convicted of any felony or been convicted of a misdemeanor of fraud, theft, forgery, bribery, embezzlement or making a fraudulent or false statement, in Mississippi or in any other jurisdiction? _____

9. **License Fee:** The Stockholder Change Application Fee is Seven Hundred Fifty Dollars (\$750.00). Enclose a cashier's check or money order made payable to the Department of Banking and Consumer Finance. **The Department does not accept company or personal checks (no exceptions)!**

10. Attach either a statement from the Surety Bond Company attesting that the bond is still in place due to the ownership change OR the **original** Surety Bond provided from the Department from a Surety qualified to conduct business in Mississippi in the amount of Twenty-five Thousand Dollars (\$25,000.00) if a Mortgage Broker and One-Hundred and Fifty Thousand Dollars (\$150,000.00) if a Mortgage Lender. The Surety Bond is to be made payable to the State of Mississippi and should expire the date that the license expires, December 31 of each year.

11. Do you understand that any false or misleading statements may be grounds for denial or revocation of license? Yes _____ No _____
12. Will the Principal Officer of the company remain the same: _____ If the company was previously held a Registration Certificate and no Principal Officer is on file with the Department, then please enclose the Statement of Principal Officer and an Initial Loan Originator Registration Application (and the requirements of that application) with this Stockholder Change Application.
13. **Enclosures to accompany application:**
- a. Cashier's check or money order made payable to the Department of Banking and Consumer Finance in the amount of \$750.00 for the Mortgage Company License Application, **Company or Personal checks will not be accepted.**
 - b. Surety bond information from the insurance company verifying that the bond is still in place.
 - c. The applicable certificates from the Mississippi Secretary of State's office
 - d. Fingerprint cards (enclosed) made by a law enforcement agency. Only 1 card per person. You may keep or mail back any extra fingerprint cards. A card should be enclosed for each owner (10% or more), principal officer named in this application and any loan originator applications included with this application.
 - e. Sign the completed mortgage application by owner of at least 10% or the named Principal Officer. The application must be notarized by a Notary Public.

I certify that the information given in this application and in all documents furnished as required to complete the application for a license is true and correct. This application should be signed by the owner or the principal officer named in this application.
(Corporate Seal)

Signature

Name

Title

State _____

County _____

Personally appeared before me, the undersigned authority in and for the jurisdiction aforesaid, the within named _____, who after first being by me duly sworn, states on oath that the statements contained in the foregoing application and all supporting documents are true and complete answers to each of the questions contained therein.

Sworn to and subscribed before me the undersigned notary on this the _____ day of _____, _____.

(Notary Seal)

Notary Public _____

My Commission expires: _____

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THE FOREGOING APPLICATION SHOULD BE COMPLETED AND ALL THE INFORMATION REQUESTED IN NUMBER 13 ATTACHED. YOU MUST SUBMIT THE ORIGINAL FORMS. THIS OFFICE WILL NOT ACCEPT FAXED COPIES. SHOULD ANY PART OF THE APPLICATION

NOT BE COMPLETE OR ANY INFORMATION OMITTED, THE ENTIRE APPLICATION WITH ENCLOSURES WILL BE RETURNED FOR PROPER ATTENTION.

PLEASE MAIL TO: DEPARTMENT OF BANKING AND CONSUMER FINANCE
ATTN: MORTGAGE DIVISION
POST OFFICE BOX 23729
JACKSON, MISSISSIPPI 39225-3729

STREET ADDRESS: 901 WOOLFOLK BUILDING, SUITE A
501 N WEST STREET
JACKSON, MISSISSIPPI 39201