

MEMORANDUM

TO: ALL LOAN BROKERS AND ORIGINATORS DOING BUSINESS IN INDIANA

FROM: OFFICE OF SECRETARY OF STATE TODD ROKITA, SECURITIES DIVISION

RE: LICENSING AND REGISTRATION REQUIREMENTS FOR LOAN BROKERS AND ORIGINATORS

Pursuant to Indiana Code 23-2-5, a loan broker may not engage in the loan brokering business and an originator may not engage in origination activities on behalf of a loan broker until the loan broker obtains a license and registers all persons engaging in origination activities on its behalf. It is unlawful to engage in loan brokering in the state of Indiana or to allow originators to engage in origination activities on your behalf until a license has been issued and registration certificates have been issued by the Secretary of State's Securities Division.

To obtain a license and register originators, submit the following items to the Secretary of State's Securities Division:

- * Properly completed loan broker license application
- * Properly completed registration form for each originator engaging in origination activities and proof (e.g. a completion certificate) the registrant has completed the educational requirements
- * \$200 application fee
- * An original signed surety bond payable to the State of Indiana in the amount of \$50,000, expiring 12/31/06, in the full name of the business with an original power of attorney
- * Certificate of Existence obtained from the Indiana Secretary of State, Business Services Division, obtained within 60 days prior to submitting the loan broker application. The Certificate of Existence may be obtained at www.sos.IN.gov/business under the "Corporations" link

The Secretary of State's Securities Division is authorized to conduct a background investigation and examination in connection with any application for a license or registration certificate.

Enclosed are a loan broker license application, the Indiana Registration Form for Origination Activities, the Indiana Loan Broker Act, and a list of approved education vendors and courses. Please call the Secretary of State's Securities Division at (317) 232-6681 if you have any questions concerning this application.

INSTRUCTIONS FOR COMPLETING LOAN BROKER LICENSE APPLICATION AND REGISTRATION FORM FOR ORIGINATION ACTIVITIES

1. The license application and registration form must be typed or printed
2. List the name, address, and telephone number for a contact person for each Indiana branch offices on the application or on a separate sheet of paper.
3. If the signature sections of the license application or the registration forms are not signed or completed properly, a new application with new notarization or a new registration form will be required. Be sure that the form is fully executed; there are three such sections in the application.
4. If the loan broker entity intends to use an assumed business name, check with of the Secretary of State's Business Services Division for the filing requirements at www.sos.IN.gov/business or (317) 232-6576, or check with your county recorder's office.

INDIANA APPLICATION FOR LICENSE AS A LOAN BROKER

State Form 38168 (R2 / 12-97) / Form SD-85
Approved by State Board of Accounts 1999

TODD ROKITA
SECRETARY OF STATE
SECURITIES DIVISION
302 W. WASHINGTON ST.
ROOM E-111
INDIANAPOLIS, IN 46204
TELEPHONE: (317) 232-6681

- INSTRUCTIONS: 1) Complete all sections.
2) The applicant must obtain a bond in the form on pages 4 and 5 of This application, from a surety company authorized to do business In Indiana. Evidence of the Bond must be filed with this application.
3) If the space provided for your answer(s) is insufficient, please attach additional explanation(s).

Indiana Code 23-2-5

INITIAL REGISTRATION: FILING FEE \$200.00
RENEWAL: FILING FEE \$200.00

INDIVIDUAL PARTNERSHIP LIMITED LIABILITY PARTNERSHIP (LLP) LIMITED LIABILITY COMPANY (LLC) CORPORATION

NAME OF APPLICANT, INDIVIDUAL, OR FIRM	
ADDRESS (NUMBER AND STREET, CITY, STATE, ZIP CODE)	
TAXPAYER I.D. NUMBER	
NAME(S) UNDER WHICH BUSINESS IS CONDUCTED, IF DIFFERENT	TELEPHONE NUMBER

PRINCIPAL TO WHOM CORRESPONDENCE MAY BE ADDRESSED		
ADDRESS (NUMBER AND STREET, CITY, STATE, ZIP CODE)		
SOCIAL SECURITY NUMBER	DATE OF BIRTH	PLACE OF BIRTH
PRINCIPAL'S HOME ADDRESS (AND PRIOR ADDRESS IF LESS THAN TWO YEARS AT PRESENT ADDRESS)		

STATE THE ADDRESS OF EACH PLACE OF BUSINESS TO BE MAINTAINED BY THE LOAN BROKER IN INDIANA

ADDRESS (NUMBER AND STREET, CITY, ZIPCODE & PHONE NUMBER)
ADDRESS (NUMBER AND STREET, CITY, ZIPCODE & PHONE NUMBER)
ADDRESS (NUMBER AND STREET, CITY, ZIPCODE & PHONE NUMBER)

HAS THE BROKER, ANY AFFILIATE, OR EMPLOYEE, BEEN CONVICTED, WITHIN THE PAST TEN (10) YEARS, OF ANY CRIME INVOLVING FRAUD OR DECEIT?

YES NO (IF YES, PLEASE SET FORTH THE CIRCUMSTANCES IN DETAIL BELOW.)

EDUCATIONAL REQUIREMENTS

I HEREBY CERTIFY THAT DURING THE LAST 24 MONTH PERIOD IMMEDIATELY PROCEEDING THIS APPLICATION THAT I, IN THE CASE OF AN INDIVIDUAL APPLICANT, OR THE FOLLOWING NAMED PRINCIPAL IN THE CASE OF A FIRM, COMPLETED _____ HOURS OF ACADEMIC INSTRUCTION, ACCEPTABLE TO THE COMMISSIONER, RELATED TO THE LOAN BROKER BUSINESS.

NAME: _____

TITLE: _____

CLASS/SPONSOR	DATE	NUMBER OF HOURS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYEES AND AGENTS ENGAGED IN ORIGATION ACTIVITIES

A FULLY COMPLETED REGISTRATION FORM (STATE FORM 49718) SETTING FORTH THE NAME, ADDRESS, HOME PHONE NUMBER, AND SOCIAL SECURITY NUMBER OF EACH EMPLOYEE OR AGENT, OR PROSPECTIVE EMPLOYEE OR AGENT, OF THE APPLICANT WHO IS OR WHO WILL BE ENGAGED IN ORIGATION ACTIVITIES MUST BE ATTACHED TO THIS APPLICATION.

AFFIDAVIT

I, _____, AS APPLICANT (IF AN INDIVIDUAL) OR AS A PRINCIPAL (IF A CORPORATION, PARTNERSHIP, LIMITED LIABILITY PARTNERSHIP, OR LIMITED LIABILITY COMPANY), DO SOLEMNLY SWEAR THAT:

- (A) NONE OF THE APPLICANT'S EQUITABLE OWNERS, DIRECTORS, MANAGERS, OR OFFICERS HAVE BEEN CONVICTED, IN ANY JURISDICTION OF AN OFFENSE INVOLVING FRAUD OR DECEPTION THAT IS PUNISHABLE BY AT LEAST ONE (1) YEAR OF IMPRISONMENT.
- (B) A REGISTRATION FORM SETTING FORTH THE NAME, HOME ADDRESS, HOME TELEPHONE NUMBER, AND SOCIAL SECURITY NUMBER OF EACH EMPLOYEE OR AGENT, OR PROSPECTIVE EMPLOYEE OR AGENT, OF THE APPLICANT WHO IS OR WILL BE ENGAGED IN ORIGATION ACTIVITIES MUST BE ATTACHED TO THIS APPLICATION.

I FURTHER SWEAR AND AFFIRM THAT THE FOREGOING ANSWERS AND STATEMENTS IN THIS APPLICATION AND ANY RELATED FORMS WERE MADE BY ME AND THAT THEY ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NOTARY CERTIFICATE (Attested)

STATE OF _____ }SS:
 COUNTY OF _____

I, _____, having been duly sworn, say that I am the above-named applicant, that I Have personally prepared the foregoing application, and the same is true to the best of my knowledge and belief.

Signature of applicant	Signature of Notary Public	
Printed or typed name of applicant	Printed or typed name of Notary Public	
Date subscribed and sworn to Notary Public	County of Residence	Date Commission Expires

CONSENT TO SERVICE OF PROCESS

THE UNDERSIGNED, (A CORPORATION) (A LLC) (A LLP) (ORGANIZED UNDER THE LAWS OF THE STATE OF _____) APPOINTS THE SECRETARY OF STATE OF INDIANA, AND THE SUCCESSORS IN SUCH OFFICE, ITS ATTORNEY IN THE STATE OF INDIANA UPON WHOM MAY BE SERVED ANY NOTICE, PROCESS OR PLEADING IN ANY ACTION OR PROCEEDING AGAINST IT ARISING OUT OF OR IN CONNECTION WITH THE CONDUCT OF A LOAN BROKER BUSINESS OR OUT OF VIOLATION OF THE LAWS OF INDIANA; AND THE UNDERSIGNED DOES HEREBY CONSENT THAT ANY SUCH ACTION OR PROCEEDING AGAINST IT MAY BE COMMENCED IN ANY COURT OF COMPETENT JURISDICTION AND PROPER VENUE WITHIN INDIANA BY SERVICE OF PROCESS UPON SAID OFFICER WITH THE SAME EFFECT AS IF THE UNDERSIGNED WAS ORGANIZED OR CREATED UNDER THE LAWS IF INDIANA AND HAS LAWFULLY BEEN SERVED WITH THE PROCESS IN INDIANA. IT IS REQUESTED THAT A COPY OF ANY NOTICE, PROCESS OR PLEADING SERVED HEREUNDER BE MAILED TO:

NAME _____

ADDRESS (NUMBER AND STREET, CITY, STATE AND ZIPCODE) _____

SIGNATURE _____

TITLE _____

DATE _____

SIGNATURE _____

TITLE _____

DATE _____

CORPORATE (OR LLC) ACKNOWLEDGEMENT

STATE OF _____

COUNTY OF _____

ON THIS _____ DAY OF _____, _____, BEFORE ME _____

THE UNDERSIGNED OFFICER OR MANAGER, PERSONALLY APPEARED _____ AND _____, KNOWN PERSONALLY TO ME TO BE THE _____

AND _____, RESPECTIVELY, OF THE ABOVE NAMED CORPORATION OR LLC, AND THAT THEY, AS SUCH OFFICERS OR MANAGERS, BEING AUTHORIZED TO DO SO, EXECUTED THE FOREGOING INSTRUMENT FOR THE PURPOSES THEREIN CONTAINED, BY SIGNING THE NAME OF THE CORPORATION OR LLC BY THEMSELVES AS SUCH OFFICERS OR MANAGERS.

(SEAL)

SIGNATURE OF NOTARY

COUNTY OF RESIDENCE _____

DATE COMISSION EXPIRES _____

NAME OF NOTARY (TYPE OR PRINT) _____

INDIVIDUAL OR PARTNERSHIP OR LLP ACKNOWLEDGEMENT

STATE OF _____

COUNTY OF _____

ON THIS _____ DAY OF _____, _____, BEFORE ME _____

THE UNDERSIGNED OFFICER, PERSONALLY APPEARED _____ PERSONALLY KNOWN TO ME TO BE THE SAME PERSON(S) WHOSE NAME(S) IS (ARE) SIGNED TO THE FOREGOING INSTRUMENT, AND ACKNOWLEDGED THE EXECUTION THEREOF FOR THE USES AND PURPOSES HEREIN SET FORTH. I WITNESS WHERE OF, I HAVE HERE UNTO SET MY HAND AND OFFICIAL SEAL.

(SEAL)

SIGNATURE OF NOTARY

COUNTY OF RESIDENCE _____

DATE COMISSION EXPIRES _____

NAME OF NOTARY (TYPE OR PRINT) _____

LOAN BROKER'S BOND

BOND NUMBER
VALIDATION DATES
FROM: _____ TO:12/31/0
SURETY PHONE NUMBER

KNOW ALL MEN BY THESE PRESENTS:

That we, _____, of _____
(Name of Principal) (City)

in the state of _____ as Principal, and _____
(Name of Surety)

a corporation organized and existing under and by virtue of the laws of the State of _____,
and duly authorized to transact the business of indemnity and suretyship in the State of Indiana, for the use and benefit of all
persons damaged by the breach of any of the conditions of this obligation, in the sum of Fifty Thousand (\$50,000) Dollars,
lawful money of the United States for the payment of which sum, will and truly to be made, we bind ourselves, our heirs
executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH THAT:

WHEREAS, the above bounden Principal has made application to the Securities Commissioner of the State of Indiana for
license as a loan broker under the provision of IC 23-2-5 and is required by the provisions of said Law to furnish a corporate
surety bond in the sum above named, conditioned as herein set forth.

NOW, THEREFORE, if the said Principal shall faithfully comply with the provisions of IC 23-2-5 and shall pay to any person
entitled thereto all damages as may be caused to such person by the failure of the Principal to faithfully comply with the
provisions of said Act; and if said Principal shall pay to any person entitled thereto all damages as may be caused to any person
together with all penalties provided by IC 23-2-5-15 then this obligation shall be void; otherwise it shall remain in full force and
effect.

This bond is subject to the following provisions:

1. Any person who sustains such damages as covered by this bond may bring an action upon this bond; provided, however,
that the aggregate liability of the said Surety to all such persons shall, in no event, exceed the amount of the bond.
2. This bond shall be and remain in full force and effect and run concurrent with the license period and any renewal thereof,
until it is terminated by the said Surety giving written notice both to the said Principal and the Securities Commissioner of
Indiana thirty (30) days prior to the effective date thereof, of its intention to terminate its liability under this bond or until
the license of said Principal as such loan broker is terminated either by expiration without renewal or by revocation for any
cause.
3. Every person who has a cause of action under IC 23-2-5 may bring action upon this bond to enforce any liability on the
bond providing, however, that no suit on this bond may be maintained to enforce any liability on this bond unless brought
within two (2) years after the act upon which it is based.

IN WITNESS WHEREOF, the parties hereto have set their hand and seals this _____ day
of _____, _____.

Surety

Principal

CORPORATE OR LLC ACKNOWLEDGMENT

STATE OF _____

COUNTY OF _____

BEFORE ME, THE UNDERSIGNED AUTHORITY, THIS DAY PERSONALLY APPEARED _____

PRESIDENT OR MANAGER AND _____ SECRETARY OF _____

A CORPORATION OR LLC, PRINCIPAL EACH OF WHOM ACKNOWLEDGE THE EXECUTION OF THE FOREGOING BOND FOR SUCH CORPORATION OR LLC FOR THE USES AND PURPOSES THEREIN SET FORTH.

WITNESS MY HAND AND OFFICIAL SEAL THIS _____ DAY OF _____, _____

(SEAL)

SIGNATURE OF NOTARY

COUNTY OF RESIDENCE

DATE COMMISSION EXPIRES

NAME OF NOTARY (TYPE OR PRINT)

INDIVIDUAL OR PARTNERSHIP ACKNOWLEDGMENT

STATE OF _____

COUNTY OF _____

BEFORE ME, THE UNDERSIGNED AUTHORITY, THIS DAY PERSONALLY APPEARED _____,

PRINCIPAL WHO ACKNOWLEDGED THE EXECUTION OF THE FOREGOING BOND FOR SUCH INDIVIDUAL OR PARTNERSHIP FOR THE USES AND PURPOSES THEREIN SET FORTH.

WITNESS MY HAND AND OFFICIAL SEAL THIS _____ DAY OF _____, _____.

(SEAL)

SIGNATURE OF NOTARY

COUNTY OF RESIDENCE

DATE COMMISSION EXPIRES

NAME OF NOTARY (TYPE OR PRINT)

