

(Department of Business Oversight Use Only)

DEPARTMENT OF BUSINESS OVERSIGHT

Fee Paid \$ \_\_\_\_\_

File No. \_\_\_\_\_

Receipt No. \_\_\_\_\_

BEFORE THE  
DEPARTMENT OF BUSINESS OVERSIGHT  
OF THE  
STATE OF CALIFORNIA

In the matter of the application of \_\_\_\_\_ )  
 )  
 )  
 )  
 )  
For a License to engage in the business of \_\_\_\_\_ )  
\_\_\_\_\_ )

(Check as applicable)

- (a) Check Seller
- (b) Bill Payer
- (c) General Prorater
- (d) Special Prorater, (business agent)

This application must be accompanied by the fees required under Section 12214 (a), California Financial Code, as follows:

Application Fee	\$200
Investigation Fee	<u>50</u>
Total Fees	\$250

Note: The above fees are not refundable if the application is withdrawn or denied.

A Check Seller applicant shall furnish a license bond on a form approved by the Commissioner in the amount of \$500,000 pursuant to Section 12205(b) of the Financial Code. In lieu of providing this bond, an applicant may deposit with the Commissioner cash in the form and manner prescribed in Section 12206.1 (FC). Bill payers and Proraters shall furnish a license bond in the amount of \$25,000.

In addition to the above, Check Sellers and Bill Payers are required to submit a fidelity bond in a minimum amount of \$50,000; for General and Special Proraters, the minimum is \$10,000.

A Check Seller must have tangible net worth of at least \$500,000, including liquid assets of at least \$150,000. A Bill Payer, General Prorater or Special Prorater must have tangible net worth of at least \$10,000 including liquid assets of at least \$5,000.

For the purpose of securing a license under the Check Sellers, Bill Payers and Proraters Law, applicant sets forth the following sworn statements of fact:

1. Principal office:

\_\_\_\_\_  
(Number and Street) (City) (County) (Zip Code)

2. Branch offices and mobile units:

\_\_\_\_\_  
(Number and Street) (City) (County) (Zip Code)

\_\_\_\_\_  
(Number and Street) (City) (County) (Zip Code)

\_\_\_\_\_  
(Number and Street) (City) (County) (Zip Code)

3. Agency locations:

\_\_\_\_\_  
(Name) (Number and Street) (City) (County) (Zip Code)

\_\_\_\_\_  
(Name) (Number and Street) (City) (County) (Zip Code)

\_\_\_\_\_  
(Name) (Number and Street) (City) (County) (Zip Code)

4. Applicant is organized and will do business as a:

(a) Individual (Special Prorater Only)

(b) California corporation, date of incorporation \_\_\_\_\_

5. Detailed statement of the proposed plan of business:

[Refer to Section 12216(a)(2)(FC)]

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Detailed statement of plan of business applicant is presently engaged in:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Names and addresses of all officers and directors; and also any employees having access to trust funds:

President: \_\_\_\_\_  
 (Name) (Number and Street) (City) (Zip Code)

Vice President: \_\_\_\_\_  
 (Name) (Number and Street) (City) (Zip Code)

Secretary: \_\_\_\_\_  
 (Name) (Number and Street) (City) (Zip Code)

Treasurer: \_\_\_\_\_  
 (Name) (Number and Street) (City) (Zip Code)

Directors: \_\_\_\_\_  
 (Name) (Number and Street) (City) (Zip Code)

\_\_\_\_\_ (Name) (Number and Street) (City) (Zip Code)

\_\_\_\_\_ (Name) (Number and Street) (City) (Zip Code)

Employees: \_\_\_\_\_  
 (Name) (Number and Street) (City) (Zip Code)

\_\_\_\_\_ (Name) (Number and Street) (City) (Zip Code)

\_\_\_\_\_ (Name) (Number and Street) (City) (Zip Code)

\_\_\_\_\_ (Name) (Number and Street) (City) (Zip Code)

NOTE: ATTACH AN EXHIBIT WHERE SPACE IS NOT SUFFICIENT

8. Any and all attachments, exhibits, or materials, or information supplied at the request of the Commissioner of Business Oversight at any time are incorporated into and made part of this application as if fully set forth therein. The following exhibits should be submitted unless previously filed with the Commissioner:

- (a) Exhibit \_\_\_\_. A corporate resolution and/or of the minutes of the directors' meeting authorizing the filing of this application, and any other minutes of directors' or shareholders' meetings relating to the operation of the business to be licensed.
- (b) Exhibit \_\_\_\_. A statement of identity and questionnaire, Department's Form FS 512 SIQ, and a personal financial statement for each of the persons named on item 7 above. Please indicate which one of the above officers is to be considered as applicant's principal managing officer:

Please refer to Sections 12216(a)(1), 12221 (e) and 12331

\_\_\_\_\_

- (c) Exhibit \_\_\_\_. A copy of the articles of incorporation or of agreement of organization and any amendments thereto.

- (d) Exhibit \_\_. A copy of any by-laws and amendments thereto.
- (e) Exhibit \_\_. A complete itemized report of applicant's financial condition as of a recent date, showing the amount and character of its assets and liabilities. If the financial statement is unaudited, it must be verified and signed. If applicant is a Corporation, the unaudited financial statement must be verified and signed by a majority of the applicant's directors.
- (f) Exhibit \_\_. A copy of each form or document to be used in the proposed business of the applicant.
- (g) Exhibit \_\_. A scheduled of fees to be charged by applicant.
- (h) Exhibit \_\_. A statement from each officer, director, or general partner, or sole proprietor, and every managing employee that he or she has read and is familiar with the Check Sellers, Bill Payers and Proraters Law (Financial Code) and the Commissioner's Rules (Code of Regulations).

9. Please answer the following questions:

- (a) Has applicant or any of its officers or directors ever been named in any Order, Judgement, or Decree of any court, temporarily or permanently, restraining it or enjoining it from engaging in or continuing any conduct, practice, or employment; or has applicant ever been convicted of any misdemeanor or felony, or has applicant ever been held liable for fraud in any civil action, or refused a license to engage in business in this state, or any other State, or has any such license held ever been suspended or revoked?

Yes

No

If "Yes," attach details as an exhibit.

- (b) Has applicant ever done business under a fictitious firm name?

Yes

No

If "Yes," attach details as an exhibit.

10. Applicant is aware of the provisions of Section 3700 of the Labor Code, which requires every employer to be insured against liability for Workmen's Compensation.

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(Name of Workmen's Compensation Insurance Carrier)

11. Applicant hereby states that it will maintain in effect insurance reasonably covering possible loss of money or property in its possession by holdup or burglary.

WHEREFORE, your applicant prays that this application be filed and that a license be issued by the said Commissioner of Business Oversight authorizing applicant to engage in business pursuant to the provisions of the Check Sellers, Bill Payers and Proraters Law.

\_\_\_\_\_  
(Applicant)

By \_\_\_\_\_  
(Title)

**VERIFICATION**

**STATE OF CALIFORNIA** \_\_\_\_\_)

**COUNTY OF** \_\_\_\_\_)

\_\_\_\_\_, being first duly sworn, deposes and says: That he is an officer of the applicant making the foregoing application, to wit, the \_\_\_\_\_ thereof; that he has read the same, including all the exhibits attached thereto, to be filed therewith, and knows the contents thereof, and that the statements made therein are true of his own knowledge except as to matters therein stated on his information or belief, and that as to matters therein stated on his information or belief, and that as to those matters he believes them to be true.

Dated \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
(Signature of Affiant)

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public in and for the County

Of \_\_\_\_\_ State of \_\_\_\_\_

Affirmation under penalty of perjury may be used in lieu of verification if execution takes place in the State of California.