Financial Code section 22153, subdivision (b), provides that if notice is not given at least 10 days prior to the change of a street address of a place of business, as required by subdivision (a), or notice is not given at least 10 days prior to engaging in business at a new location, as required by Financial Code section 22102, the Commissioner may assess a civil or administrative penalty on the licensee not to exceed five hundred dollars ($500).

Your change of address request must be received by the Department 10 days prior to the date of your move <u>or an administrative penalty of $500 will be assessed</u>. If your change of address is for your principal or main location, you must submit a rider from your surety bond company reflecting your new location. Your request cannot be processed without the submission of this rider. **Submit one completed form per location.**

Name of Licensee:_____

License No:_____NMLS ID (if applicable): _____

Provide the name, title, address, email address, and telephone number of the person to contact regarding this request. The amended license will also be mailed to this person unless otherwise instructed. The name of the person must be a responsible officer or compliance person from the main office of the company.

Attention:

_____
    (Name)   (Title)

_____
 (Number and Street)   (City)   (State)   (Zip Code)

_____
 (Email Address)   (Telephone Number)

Change of address is for: Main Office or Principal Location   Branch

If Main Office Location, provide Surety Bond No.: _____

Bond Rider attached?   Yes   No

Current Address: _____

_____

Proposed New Address:_____

_____

Effective Date of Change:_____

I declare under penalty of perjury that I have read the form and know the contents thereof, and that the statements therein are true and correct.

This Change of Address Form must be signed by an officer who has PREVIOUSLY completed and submitted a Statement of Identity and Questionnaire or filed an MU2 on the Nationwide Mortgage Licensing System Registry. No other officer is authorized to sign this document on behalf of the applicant.

Executed at: _____   _____
               (City, County, State)   (Signature of Declarant)*

                                               _____
                                               (Typed Name of Declarant)

Date: _____   _____
                                                 (Title of Declarant)