

STATE OF CALIFORNIA – DEPARTMENT OF FINANCIAL PROTECTION AND INNOVATION  
**REQUEST FOR CONSENT TO TRANSFER AN INTEREST IN AN ESCROW  
 AGENT’S LICENSE**

DFPI-EL 17213 (Rev. 03-25)



**Department of Financial Protection and Innovation’s File No** \_\_\_\_\_

1. (a) Name of Escrow Agent: \_\_\_\_\_  
 (b) Former Name, if any: \_\_\_\_\_

2. Description of interest(s) and number proposed to be transferred:  
 (State title of each class of interests (e.g., Class A Common Stock). If rights, warrants and options are listed, also specify the securities to be transferred upon exercise thereof. If securities are to be pledged, so state.)

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

3. Name and address of each transferor:  
 (If space is insufficient, incorporate and attach additional sheets.)

| Name  | Address | Aggregate Number<br>to be Transferred | Percentage to Total<br>Number<br>Outstanding |
|-------|---------|---------------------------------------|--|
| _____ | _____   | _____                                 | _____  |
| _____ | _____   | _____                                 | _____  |
| _____ | _____   | _____                                 | _____  |
| _____ | _____   | _____                                 | _____  |

4. Name and address of each proposed transferee:  
 (If space is insufficient, incorporate and attach additional sheets.)

| Name  | Address | Aggregate Number<br>to be Transferred | Percentage to Total<br>Number<br>Outstanding |
|-------|---------|---------------------------------------|--|
| _____ | _____   | _____                                 | _____  |
| _____ | _____   | _____                                 | _____  |
| _____ | _____   | _____                                 | _____  |
| _____ | _____   | _____                                 | _____  |

5. Address of principal executive office of Escrow Agent:

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

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6. *Name and address of person to whom correspondence regarding this request for consent should be directed:*

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

7. *Execution Instructions:*

*If a transferor is other than an individual, the name of the entity should be typed or printed above the signature line exactly as shown in Item 3. The signature should show the name and title of the person authorized to sign for such transferor.*

*I/We certify (or declare) under penalty of perjury under the laws of the State of California that I/we have read this notice and know the contents thereof, and that the statements herein are true and correct.*

Executed at \_\_\_\_\_, \_\_\_\_\_  
(Place) (Date)

*(If the transferor is other than an individual, give the name of the entity and the name and title of the person executing the application on behalf of such entity.)*

\_\_\_\_\_  
(Signature of Transferor)

\_\_\_\_\_  
(Signature of Transferee)

\_\_\_\_\_  
(Signature of Transferor)

\_\_\_\_\_  
(Signature of Transferee)

\_\_\_\_\_  
(Signature of Transferor)

\_\_\_\_\_  
(Signature of Transferee)

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**DFPI’s Privacy Notice on Collection**

**DFPI Collects and Uses Personal Information:** The DFPI collects the information requested on this form as authorized by the California Financial Code section 17213. The DFPI uses this information for request for consent to transfer an ownership interest in an escrow agent’s license and for the Department to have knowledge of the type and number of securities that are being transferred. Use of the personal Information DFPI collects is subject to limitations contained in the Information Practices Act of 1977 and other applicable state and federal laws.

**Providing Personal Information Is Voluntary:** You do not have to provide the personal information requested. If you do not want to provide personal information, such as your name, home address or home telephone number, you may remain anonymous. However, we may not be able to contact you or help resolve your issue. When providing information or documents, please do not include unrequested personal information such as a Social Security number, driver’s license number, or financial information.

**DFPI May Disclose Your Personal Information:** We may share your personal information with other federal, state or local law enforcement agencies or a self-regulatory organization as authorized by law. Your personal information may also be disclosed:

- In response to a Public Records Act request, as allowed by the Information Practices Act.
- To another governmental agency as required by state or federal law.
- In response to a court order or administrative order, a subpoena or a search warrant.

**Your Access to Your Personal Information:** You may review the records maintained by DFPI that contain your personal information. To request access, contact: DFPI Privacy Officer, 651 Bannon Street, Suite 300, Sacramento, CA 95811, (866) 275-2677.