



NAME OF MORTGAGE BROKER

ADDRESS  
CITY, STATE, ZIP  
TELEPHONE NUMBER  
FACSIMILE NUMBER  
EMAIL

DATE

J.A. Whitehead  
Alabama State Banking Dept.  
401 Adams Ave., Suite 680  
Montgomery, AL 36130-1201

RE- Application: AL Mortgage Broker Application  
Applicant: NAME OF MORTGAGE BROKER

Dear Mr. Whitehead

Enclosed you will find the completed Application submitted for approval by the Applicant, along with check(s) for the applicable fees in the following amount:

License Fee	\$500	Alabama State Banking Dept.
Investigation Fee	\$100	Alabama State Banking Dept.

In order to assist you in expediting this Application, I am available to answer any questions you may have. Thank you for your immediate attention to this matter.

Sincerely,

PRESIDENT'S NAME

# APPLICATION FOR ORIGINAL LICENSE

Mortgage Brokers Licensing Act  
State Banking Department  
401 Adams Avenue, Suite 680  
Montgomery, AL 36130

To the State Banking Department, State of Alabama:

Application is hereby made to engage in the business of brokering mortgage loans pursuant to Act 2001-692.

APPLICANT \_\_\_\_\_

D/B/A (if different) \_\_\_\_\_

Applicant is a corporation \_\_\_\_\_ partnership \_\_\_\_\_ individual \_\_\_\_\_ other \_\_\_\_\_  
(Identify)

LOCATION OF OFFICE: STREET \_\_\_\_\_ PHONE \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Does your principal place of business comply with local zoning ordinances? Yes \_\_\_\_\_ No \_\_\_\_\_

Department Correspondence should be directed to:

Name: \_\_\_\_\_ PHONE \_\_\_\_\_

Address: Street or P.O. Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Complete the following for each owner, partner, or principal as applicable:

Name: \_\_\_\_\_ Title \_\_\_\_\_ Ownership %: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Name: \_\_\_\_\_ Title \_\_\_\_\_ Ownership %: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Name: \_\_\_\_\_ Title \_\_\_\_\_ Ownership %: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Name: \_\_\_\_\_ Title \_\_\_\_\_ Ownership %: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

(Continue on attachment if necessary)

Please state the complete address of the applicant's initial registered office and any other locations at which the applicant will engage in any business activity covered by this Act.

Name: \_\_\_\_\_ PHONE \_\_\_\_\_

Address: Street or P.O. Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Have any of the principals or owners been convicted of a felony or any crime involving breach of trust, fraud, or dishonesty?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have any of the principals or owners had a broker or loan license denied, revoked, or suspended in any jurisdiction?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, which state(s): \_\_\_\_\_  
\_\_\_\_\_

Do you operate other locations in the state of Alabama or any other state? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list:

Name of State	Trade Name	Date Originally Licensed

(Continue on attachment if necessary)

THE FOLLOWING ATTACHMENTS AND EXHIBITS MUST ACCOMPANY THIS APPLICATION:

- ATTACHMENT 1. Resume of all owners or principals of the applicant for the past five (5) years.
- ATTACHMENT 2. The general plan and character/nature of the business.
- ATTACHMENT 3. Evidence of the satisfactory completion of the required 12 hours of approved continuing education
- ATTACHMENT 4. A financial statement of the applicant prepared using standard accounting practices and procedures covering the past financial year, prepared within the last 90 days under the supervision of a CPA.
- ATTACHMENT 5. Three (3) letters of reference with regard to the applicant's good name and reputation in the community.
- ATTACHMENT 6. Three (3) letters of reference from lenders concerning the applicant's experience and expertise.
- ATTACHMENT 7. A certified copy of the Articles of Incorporation and By-Laws, if other than a corporation, a certified copy of tile Articles of Organization.
- ATTACHMENT 8. A copy of the applicant's customer-broker agreement.
- ATTACHMENT 9. A check for \$100 for the investigation fee and a separate check for \$500 for the license fee, made payable to the STATE BANKING DEPARTMENT.

**AFFIDAVIT**

I, \_\_\_\_\_ the undersigned, being the \_\_\_\_\_  
[Officer (Title), Partner or Owner]

of \_\_\_\_\_

swear (or affirm) to tile best of my knowledge and belief that the statements contained in this application are true and complete.

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Signature

Sworn and subscribed to before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public

## **INDEX OF EXHIBITS**

**Attachment 1:** Resumes for Officers and Directors

**Attachment 2:** Description of Business Operations

**Attachment 3:** Education Requirement Proof

**Attachment 4:** Financial Statement

**Attachment 5:** Three Letters of Recommendation of character

**Attachment 6:** Three Letters of Recommendation from lenders

**Attachment 7:** Articles of Incorporation and By-laws

**Attachment 8:** Customer-broker Agreement

**Attachment 9:** Checks

**Attachment 1:**

**Resumes for Officers and Directors**

**Attachment 2:**

Description of Business Operations

**Attachment 3:**

Education Requirement Proof

Attachment 4:

Financial Statement

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Three Letters of Recommendation of character

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Articles of Incorporation and By-laws

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Checks