



**COMMONWEALTH OF KENTUCKY
PUBLIC PROTECTION CABINET
DEPARTMENT OF FINANCIAL INSTITUTIONS
APPLICATION FOR A CONSUMER LOAN LICENSE**

INSTRUCTIONS: COMPLETE EVERY BLANK ON APPLICATION. IF A QUESTION IS NOT APPLICABLE, INDICATE BY NOTING "N/A". TYPE OR PRINT IN INK. ALL ATTACHMENTS MUST BE LABELED. MAIL COMPLETED APPLICATIONS AND APPROPRIATE FEES TO THE DEPARTMENT OF FINANCIAL INSTITUTIONS, 1025 CAPITAL CENTER DRIVE, SUITE 200, FRANKFORT, KENTUCKY 40601, ATTN: DIVISION OF NON-DEPOSITORY INSTITUTIONS, LICENSING BRANCH.

DATE: _____

To the Commissioner, Kentucky Department of Financial Institutions:

The following hereby makes application for a license to conduct a Consumer Loan business as provided in Kentucky Revised Statutes Chapter 286.4 at the following principal location:

(Complete Legal Name of Entity to be licensed. Include Assumed Name if applicable ("d/b/a"))

(Street Address for location where licensed business is to be conducted)

(City, County, State, Zip Code)

(Telephone Number)

(FAX Number)

(Name of primary contact person to discuss application questions)

(Email)

Applicant Information:

1. If the applicant is an individual (i.e. sole proprietor), provide the following:

a) Residence Address: _____
(Street Address)

(City, State, Zip)

b) Residence Phone Number: _____

c) Social Security Account Number: _____

2. Identify all businesses the applicant intends to operate at the licensed location other than that of a consumer loan company, if any. Please review KRS 286.4-470 regarding limitations on locations at which business may be conducted.

3. Identify the name and address of all affiliates (i.e. businesses with common ownership) of the applicant.

4. Identify all criminal convictions of the applicant, its officers, directors, agents, or employees. Misdemeanor traffic violations may be omitted.

5. Identify all administrative and civil actions (e.g. cease and desist orders, consent orders, injunctions, license suspensions, license revocations, license denials, fines, etc.) taken against the applicant, its officers, directors, agents, or employees by a state or federal regulatory agency, including the Department of Financial Institutions.

6. Identify all instances where the applicant, or any of its officers, directors, agents, or employees was accused in a civil or administrative proceeding of doing any of the following:

- a) Engaging in fraudulent or dishonest conduct,
- b) Failing to comply with any state or federal regulatory requirements, or
- c) Committing any breach of contract or tort related to business dealings.

7. Identify any derogatory information that may appear on the personal credit report of any owner of the applicant.

* For all affirmative responses to Questions 4-7, attach a written explanation and supporting documentation.

Headquarters Office Information:

If the applicant's headquarters or corporate office is at a location other than the location to be licensed, provide the following information:

(Street Address for Headquarters Office)

(City, County, State, Zip Code)

(Telephone Number)

(FAX Number)

Required Attachments

The following information is incorporated as a part of this Form CL-1 and must be attached to this application. Each attachment should be labeled at the top of the first page with the appropriate identifying letter, Attachment A through Attachment G. Applications submitted without all required attachments shall be considered incomplete.

Attachment A

A list of all states or jurisdictions in which the applicant is operating a business making loans of \$15,000 or less at the time of application, the type and identification number of each license held, and the date the applicant commenced business in each state.

Attachment B

A list of all owners, officers, and directors where the applicant is not an individual, as follows:

(i) For a partnership of any form, the applicant shall provide the complete name, social security number, residence address, residence phone number, business address, business phone number, and percentage of ownership of each partner; and

(ii) For a corporation, limited liability company, and any other legal entity that is not a partnership of any form, the applicant shall provide the complete name, social security number, residence address, residence phone number, business address, business phone number, and percentage of ownership of each officer, each director, and each shareholder owning more than five percent (5%) of the company.

Attachment C

Copies of all required filings and registrations as follows:

(i) For an individual, the applicant shall submit a copy of the applicable local business registrations, including those identifying the applicant's assumed name under which it intends to conduct business; and

(ii) For a partnership of any form, a corporation, a limited liability company, or any other legal entity, the applicant shall submit copies of partnership agreements, articles of incorporation, certificate of assumed name, and certificate of authority to conduct business in Kentucky, as applicable.

Attachment D

A current financial statement of the applicant and any individual or entity owning more than five percent (5%) of the applicant completed within ninety (90) days of the application date. Each financial statement must be compiled, reviewed, or audited by a certified public accountant. For an application for an initial Kentucky location, the financial statement shall include an initial balance sheet and a twelve (12) month projected cash flow statement;

Attachment E

A Kentucky business plan including a description of each loan product the applicant plans to make available.

Attachment F

A resume of the applicant. If the applicant is a partnership of any form, a corporation, a limited liability company, or any other legal entity the applicant shall include the resume of each person owning more than five percent (5%) of the applicant and a resume of each manager.

Attachment G

A consumer credit report for each the following individuals showing each individual's personal credit history that is obtained from a major consumer credit reporting agency within sixty (60) days of the filing of this application:

- (i) If the applicant is an individual, a credit report for the applicant;
- (ii) If the applicant is a partnership of any form, a credit report for each partner; and
- (iii) If the applicant is a corporation, limited liability company, or any other legal entity that is not a partnership of any form, a credit report for each officer and director.

Application Investigation and Initial License Fees

The completed application must be accompanied by an investigation fee of:

- Two hundred fifty dollars (\$250) if the application is for an initial location, or
- One hundred fifty dollars (\$150) if the application is for an additional location for a current licensee.

The initial license fee must also accompany the completed application as follows:

- Four hundred dollars (\$400) if the application is filed January 1 through June 30, or
- Two hundred dollars (\$200) if the application is filed July 1 through December 31.

The investigation fee and initial license fee may be combined in one payment. Checks or money orders must be made payable to the **KENTUCKY STATE TREASURER**.

----- DO NOT STAPLE PAYMENT TO THE APPLICATION -----

APPLICANT CERTIFICATION

STATE OF _____)
COUNTY OF _____)

I, _____, hereby declare on my oath that I have
(Name of applicant or applicant's Agent)
executed this application on behalf of _____ and that the facts
(Name of applicant or "myself")
stated in the application are true and correct. I further state that I have read and will comply with
KRS Chapter 286.4, and all administrative regulations and orders promulgated or issued pursuant
thereto.

Signature of Applicant or Applicant's Agent

Subscribed and sworn to before me this
_____ day of _____, 2____.

Notary Public - State at Large
My Commission Expires: _____