

STATE OF NEW MEXICO REGULATION AND LICENSING DEPARTMENT FINANCIAL INSTITUTIONS DIVISION

P.O. Box 25101, 2550 Cerrillos Road, 3rd Floor, Santa Fe, NM 87504

Phone: (505) 476-4559 Fax: (505) 476-4570 www.rld.state.nm.us/financialinstitutions

APPLICATION FOR ORIGINAL COLLECTION AGENCY BRANCH LICENSE

GENERAL INSTRUCTIONS

- 1. Use this form if applying for a collection agency branch license for the first time. If you currently maintain a collection agency branch license, do not use this form. Instead, complete the Renewal Application for Collection Agency and Manager License, available on the Financial Institutions Division (the Division) website.
- 2. THE ENCLOSED APPLICATION MUST BE COMPLETED IN ITS ENTIRETY. Applications containing incomplete responses, or lacking fees or exhibits will be returned to the applicant. Please complete the checklist on the last page of this packet to ensure that the application is complete.
- 3. If the space provided for answers is inadequate, additional pages should be attached. Attachments must identify the following information in the top right corner of every page: applicant name, and the specific item on the application to which the answer relates.
- 4. All exhibits must include in the top right corner of every page: applicant name, and exhibit letter.
- 5. If the company maintains more than one location, each location must be licensed. The company must complete an application for each location and pay an application fee of five hundred dollars (\$500.00). The only methods of payment accepted are checks or money orders made payable to the Financial Institutions Division.
- 6. All collection agency branch licenses will expire at the close of business on June 30th of each year, unless renewed for the upcoming year. License renewal applications are due at the close of business on May 31st of each year.
- 7. Upon the Division's receipt of a complete application, an investigation will be made into the financial responsibility, character, and general fitness of the applicant.
- 8. The application and all exhibits may either be send electronically or mailed. For electronic submissions, upload an electronic copy of the application through the Financial Institutions Division's secure portal, Mail Express. Please use the subject line "Collection Agency Branch Application" and the sender email address FID.Renewals@state.nm.us. Further Instructions are available on the Financial Institutions Division website. For mailed submissions, forward the application and exhibits to the Financial Institutions Division, P.O. Box 25101, 2550 Cerrillos Road, 3rd Floor, Santa Fe, NM 87504.
- 9. The application fee and a cover letter containing the applicant name and contact information must be mailed to: The Financial Institutions Division, P.O. Box 25101, Santa Fe, NM 87504. Failure to submit a complete application applicable exhibits, and all fees may result in the denial of license.

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I. GENERAL APPLICANT INFORMATION

COLLECTION AGENCY BRANCH:

1	Name of Legal Entity:	(The legal Entity applying for this license)			
2	D/B/A if Applicable:	("Doing Business As")(Fictitious Name)			
3	Type of Business Organization:	☐ New Mexico Corporation☐ Limited Liability Company (LL☐ Sole Proprietor	_	poration pility Partnership (LLP)	
4	Physical Address for the Branch Office :	(Physical Street Address) (City)	(State)	(Zip Code)	
5	Physical Address for the New Mexico Office: All foreign corporations must maintain a full time bone fide physical location in the State of New Mexico.	(Physical Street Address) (City)	(State)	(Zip Code)	
6	Designated Contact Person to Respond to Licensing Questions:	(Email)- This field must be completed to receive official correspondence (Name of Contact Person) (Physical Street Address) (City) (State) (Zip Code) (Phone Number) (Fax Number)			

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7	Designated Contact Person for the Corporate Office:	(Email)- This field must be completed to receive official correspondence (Name of Contact Person) (Physical Street Address)			
		(City)	(State)	(Zip Code)	
		(Phone Number)		(Fax Number)	
8 Designated Contact Person to Respond to Consumer Complaints: (Name of Contact Person		nust be completed to receive	official correspondence		
		(Physical Street Address)			
		(City)	(State)	(Zip Code)	
		(Phone Number)		(Fax Number)	
9	Name of Licensed Manager Must be a resident of New Mexico	(Email)- This field must be completed to receive official correspondence			
		(Name of Contact Po			
		(Physical Street Ada	ress)		
		(City)	(State)	(Zip Code)	
		(Phone Number)		(Fax Number)	
10	Current Collection Agency License Number:				
11	Current Collection Agency Manager License Number:				
12	Does the company engage in repossessions?	☐ No ☐ Yes If Yes, repossession	on license number:		

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Question 13: State Reference: Enter appropriate number in the box for each jurisdiction where the applicant is or has ever been licensed to engage in any collection activities.

Enter 1 if applicant has a pending application in that jurisdiction

Enter 2 if applicant is already licensed in that jurisdiction

Enter 3 if applicant was formerly licensed in that jurisdiction

AL	FL	LA	NE	OK	VT
AK	GA	ME	NV	OR	VA
AZ	HI	MD	NH	PA	WA
AR	ID	MA	NJ	RI	WV
CA	IL	MI	NM	SC	WI
CO	IN	MN	NY	SD	WY
CT	IA	MS	NC	TN	
DE DC	KS	MO	ND	TX	
DC	KY	MT	ОН	UT	

II. SURETY BOND

☐ EXHIBIT **A**: Attach a corporate surety bond rider or a new corporate surety bond increasing the company's current bond by five thousand dollars (\$5,000).

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III. COMPANY OATH AND STATEMENT STATE OF_____) COUNTY OF I, ______, the undersigned, being the _____ (printed name of authorized representative) (Officer [title], partner or owner) of ______ understand that application is ______ (name of applicant company) hereby made for a Collection Agency license as provided for in Chapter 61-18A-1 et seq., New Mexico Statutes Annotated 1978, to engage in business at the location herein specified. I hereby certify and affirm that all information, statements, attachments, and exhibits submitted with this application are true and correct to the best of my knowledge and belief. I acknowledge that any misstatements contained herein may cause the Financial Institutions Division to deny the application for license, or to initiate later proceedings against this license. I understand that a license, if granted, is a revocable privilege to be enjoyed and exercised only in accordance with all the terms and conditions of 61-18A-1 NMSA 1978 et. seq. and the accompanying lawful regulations promulgated by the Director. Corporate Seal if applicable) (Authorized Signature) EXECUTED THIS ______day of _______, 20_____. SUBSCRIBED AND SWORN TO before me on this _____ day of _____, ____ by in ______irement) (City) (name of person making statement) (State) (Notary Public) My commission expires:

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(Notary seal)

XIII. COMPANY APPLICATION CHECKLIST

BEFORE SUBMITTING THE APPLICATION TO THE FINANCIAL INSTITUTION DIVISION, PLEASE ENSURE THAT THE FOLLOWING ITEMS ARE INCLUDED IN TESUBMISSION PACKET:
All attachments and exhibits include applicant name, and question number in the top righ corner of each page.
MANDATORY APPLICATION ITEMS:
EXHIBIT A: SURETY BOND Attach a new surety bond or bond rider increasing the current bond by five thousand dollars (\$5,000).
☐ ENCLOSED CHECK OR MONEY ORDER PAYABLE TO FINANCIAL INSTITUTIONS DIVISION FOR <u>APPLICATION FEE OF FIVE HUNDRED DOLLARS (\$500.00)</u>
☐ ENCLOSED COMPANY NOTARIZED OATH AND STATEMENT

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