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IDAHO MORTGAGE BROKER/LENDER APPLICATION
Jurisdiction-Specific Requirements for the State of Idaho
Form MU3 Uniform Mortgage Broker/Lender License Branch Application

The following items must be included with any submission for a mortgage broker/lender branch license in addition to the requirements of the uniform branch application form. The “Home/Main/Corporate” location must be licensed prior to any branch. Each additional branch location desiring to conduct business in Idaho must be separately licensed and will require a separate filing of an MU3 application form with appropriate fees and bond. Fingerprints are not required in Idaho at this time. Amendments to the Form MU3 require full execution and notary.

1. **Qualified Person in Charge:** This person must demonstrate a minimum of three (3) years’ experience specifically in residential mortgage brokering/lending. Idaho Code § 26-3108(2)(b). This person does not have to be an owner, officer, member, partner, director or any other specifically-titled employee. A resume must also be submitted and it must contain names, addresses, dates (mo/yr) of employment and **detailed job descriptions/duties** for all employers. Job titles alone are NOT sufficient. Make sure job descriptions or duties actually describe what this person does or has done—avoid words such as “manages”, “supervises” “responsible for” etc., unless other information details hands-on experience.

Name of Qualified Person in Charge	Business Address	
Phone	Fax	email

The QPIC must obtain a mortgage loan originator license if he/she conducts or will conduct mortgage loan origination activities in Idaho. If not, this person is still required to obtain continuing education in accordance with IDAPA 12.01.10 (10).

The Form MU2 must be completed and provided for each designated QPIC.

2. **Evidence of filing with the Idaho Secretary of State’s office:** If there is no additional dba to be added for this branch other than what has been previously filed, no additional submission is required. Otherwise, this may be a file-stamped (accepted) copy of the appropriate application or a copy of the actual certificate as issued. If a “d/b/a” or “fictitious” business name will be used in Idaho whether through electronic or other means, provide a file-stamped copy of the Certificate of Assumed Business Name. Contact (208) 334-2300 or www.idsos.state.id.us for further information and filing requirements.
3. **Samples of all origination forms that Idaho borrowers will be required to sign or acknowledge prior to closing.** Idaho Code § 26-3105(8). Do **not** include closing documents such as the Note, Deed of Trust, etc. *Form samples should also include those used to satisfy the four (4) required disclosures under Rule 50 (IDAPA 12.01.10.50.* Model forms are available on the Department’s website at <http://finance.idaho.gov> and are included in any application package that is requested by mail. **If no new or modified forms have been implemented since the most recent licensure or renewal of the firm, no additional submission is required.**
4. **Application Fee:** \$350.00 payable to the Idaho Department of Finance. There are no fees charged for amendments such as name or address changes, additions/subtractions of d/b/a’s, or corrections. A new full complete application package and fee will be required if the structure of the licensee is changed.

Please submit all items simultaneously. Failure to submit a completed application may result in the denial of the application submission. Based on review of the submitted information, additional documents or information may be required. If you have not received **any** form of communication within 30 days of the Department's receipt of a complete application you may contact 208.332.8002 for a status. Status checks requested under 30 days will delay your application process. The Department is allotted 60 days for review of a complete application by statute. All approved licensees are posted to the Department's website daily.

YOU ARE NOT AUTHORIZED TO ENGAGE IN MORTGAGE BROKERING OR MORTGAGE LENDING ACTIVITIES IN IDAHO UNTIL YOU HAVE RECEIVED A LICENSE AS AN ENTITY AND NO LOAN ORIGINATOR IS AUTHORIZED TO ENGAGE IN MORTGAGE LOAN ORINATION ACTIVITIES UNTIL THEY HAVE RECEIVED A LICENSE OR PROVIDED EVIDENCE OF EXEMPTION.

Return this Form with your application package.

UNIFORM MORTGAGE BRANCH OFFICE FORM FORM MU3 INSTRUCTIONS

A. GENERAL INSTRUCTIONS

1. **FILING** – Form MU3 is the Branch Office form accompanying the Form MU1-Uniform Mortgage Lender/Mortgage Broker form. An *applicant* for a Mortgage Lender or a Mortgage Broker license may apply for a branch office to *jurisdiction(s)* that have adopted the uniform Form MU3. The *applicant* must also refer to published *jurisdiction*-specific requirements from each *jurisdiction* in which it is applying requirements relating to branch offices.
2. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases.
3. **EXECUTION** – The execution section must be completed by an authorized representative of the *applicant*.
4. **DATES** – The filing date is the date *applicant* submits this form to the *jurisdiction(s)*. The desired effective date is the date *applicant* would like this license/registration or amendment to become effective. Review published *jurisdiction*-specific requirements for effective date expectations.
5. **AMENDMENTS** – The *applicant* must update information about a branch office, as required in each applicable *jurisdiction*, by submitting amendments using Form MU3. When making changes to an existing license/registration, check the “amendment” box on line 1, provide all previous information in items 2a through 6a, filing and effective dates, license number where applicable, and complete only the information that is being amended in item(s) 2b through 6b or 7 through 11. Review published *jurisdiction*-specific requirements concerning the return of the prior original license/registration document when submitting the amended Form MU3.
6. **CONTACT EMPLOYEE** – The individual listed on the *applicant's* Form MU1 (company's main office) as the contact employee will be contacted by *jurisdiction(s)*, if needed, about this branch Form MU3.
7. **RECORDS** – Please identify where records will be kept if the *applicant* intends to maintain records for the branch office at a location other than the main address of the *applicant* or the location specified in item 2(C) on Form MU1.
8. **SURRENDER / CANCEL**– When an *applicant* decides to cease operations under the license/registration, at one or more branches, use the Form MU3 to notify *jurisdiction(s)* by checking the “surrender” box and completing only items 2, 7, and 8. Submit a separate Form MU3 for each branch license that is being surrendered. Send the original license/registration document (if any was issued) to the *jurisdiction(s)* along with the Form MU3 to surrender/cancel. Use the Form MU1 to notify *jurisdiction(s)* if the entire company will cease operations under the license/registration. Review published *jurisdiction*-specific requirements concerning additional specific requirements at closure.

B. FILING INSTRUCTIONS

1. **FORMAT**
 - A. Form MU3 may accompany a new company filing with Form MU1, or may follow the Form MU1 later. A fully completed Form MU3 must be submitted to each applicable *jurisdiction* when the *applicant* is filing for branch authorization the first time. The *applicant* should review *jurisdiction*-specific requirements published by each *jurisdiction* for specific branch filing requirements, including applicable fees.
 - B. The Execution section must include notarized original manual signature for the initial Form MU3 filing for each branch office.
 - C. Type all information.
 - D. Use only the current version of Form MU3 or a reproduction of it.
2. **ATTACHMENTS**
 - A. File a Form MU2 for each branch manager identified in item 6 if required by published *jurisdiction*-specific instructions.
 - B. Some *jurisdiction(s)* require separate filings for use of fictitious name/trade name/doing business as (“dba”) name(s) as seen in item 5. Other *jurisdictions* permit the branch office to use only the dba licensed for the company. Consult the *jurisdiction(s)* to determine such requirements, and attach a copy of such filing if required by that *jurisdiction*.
 - C. Depending on the *jurisdiction*, individual(s) originating mortgage loans at the branch office may need to file a Form MU4. Review published *jurisdiction*-specific requirements to verify the requirements there.
3. **JURISDICTION-SPECIFIC REQUIREMENTS** – Review published *jurisdiction*-specific requirements in which the *applicant* is applying for a list of requirements unique to the *jurisdiction(s)*, including applicable fees, records retention, branch-related bonding, etc.

- C. EXPLANATION OF TERMS** – The following terms are italicized throughout Form MU3
- APPLICANT** – The mortgage lender or mortgage broker applying on or amending information on this form for a branch license/registration. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.
- JURISDICTION** – A state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.
- PERSON** – An individual, partnership, corporation, trust, or other organization.

FORM MU3	UNIFORM MORTGAGE BRANCH OFFICE FORM				<input type="checkbox"/> MORTGAGE BROKER
	Applicant full legal name: _____				<input type="checkbox"/> MORTGAGE LENDER
Date of filing (MM/DD/YYYY): _____		Desired Effective Date (MM/DD/YYYY): _____			

License Number information (if applicable) is optional. Use additional sheets if necessary.	License #	Jurisdiction	License #	Jurisdiction	License #	Jurisdiction
	License #	Jurisdiction	License #	Jurisdiction	License #	Jurisdiction

1. NEW APPLICATION AMENDMENT **Complete "b" for the item(s) being amended.**
 SURRENDER/CANCEL OTHER (review jurisdiction-specific instructions)

2a.	_____ Physical address (Number and Street) _____ Physical City, State/Country, Zip+4/Postal Code	2b.	_____ NEW Physical address (Number and Street) _____ NEW Physical City, State/Country, Zip+4/Postal Code
3a.	_____ Mailing address or P.O. Box (if different from Physical) _____ Mailing address City, State/Country, Zip+4/Postal Code	3b.	_____ NEW Mailing address or P.O. Box (if different from Physical) _____ NEW Mailing address City, State/Country, Zip+4/Postal Code
4a.	() _____ - _____ ext _____ Business (Area Code) and Telephone Number () _____ - _____ Fax (Area Code) and Number _____ Branch website (enter "None" if not applicable)	4b.	() _____ - _____ ext _____ NEW Business (Area Code) and Telephone Number () _____ - _____ NEW Fax (Area Code) and Number _____ NEW Branch website
5a.	_____ Trade name or "dba" used at this branch	5b.	_____ NEW Trade name or "dba" used at this branch
6a.	_____ Branch Manager Name	6b.	_____ NEW Branch Manager Name

EXECUTION: The undersigned, being first duly sworn, deposes and says that he/she has executed this form on behalf of, and with the authority of, said *applicant* and agrees to and represents the following:

- (1) That the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part hereof, are current, true and complete;
- (2) To the extent any information previously submitted is not amended such information is currently accurate and complete;
- (3) That the *jurisdiction(s)* to which an application is being submitted may conduct any investigation in accordance with state law, into the background of the *applicant* for purposes of issuing the subject licenses;
- (4) To keep the information contained in this form current and to file accurate supplementary information on a timely basis;
- (5) To keep accurate books and records or otherwise comply with the provisions of law pertaining to the conduct of business for which the *applicant* is applying.

Notary seal here	_____ Date (MM/DD/YYYY) Signed or attested before me: _____ _____ Print Notary Public name on this _____ day of _____, Date Month Year _____ Notary Public signature	_____ Signature of <i>applicant's</i> representative by _____ _____ Print <i>applicant's</i> representative name _____ at _____ Year State County _____ Notary Appointment Expires (MM/DD/YYYY)
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***This execution must always be completed in full with original, manual signature and notarization.
 Affix notary stamp or seal where applicable.***

Applicant full legal name: _____

7.	Physical address of location where the official books and records generated by this branch office will be kept. <input type="checkbox"/> Check here if same as previously specified principal records location (Item 2C on Form MU1). Review requirements from each <i>jurisdiction</i> for specific records retention requirements.			
	_____ Records Custodian Name	(____) _____ - _____ ext _____ Business Phone	(____) _____ - _____ Fax Line	_____ e-mail address
	_____ Number & Street	_____ City	_____ State / Province & Country	_____ Zip+4 / Postal Code

8 Enter appropriate number in the box(es) for each *jurisdiction* by location:
 Enter "1" if *applicant* is **newly applying** in that *jurisdiction* as a mortgage branch office.
 Enter "2" if *applicant* has a **pending application** in that *jurisdiction* as a mortgage branch office.
 Enter "3" if *applicant* is **already licensed/registered** in that *jurisdiction* as a mortgage branch office.
 Enter "4" if *applicant* is **surrendering/canceling** in that *jurisdiction* as a mortgage branch office.

	ML	MB		ML	MB		ML	MB		ML	MB
Alabama			Idaho			Montana			Rhode Island		
Alaska			Illinois			Nebraska			South Carolina		
Arizona			Indiana			Nevada			South Dakota		
Arkansas			Iowa			New Hampshire			Tennessee		
California – DOC			Kansas			New Jersey			Texas – OCCC		
California – DRE			Kentucky			New Mexico			Texas – SML		
Colorado			Louisiana			New York			Utah		
Connecticut			Maine			North Carolina			Vermont		
Delaware			Maryland			North Dakota			Virginia		
District of Columbia			Massachusetts			Ohio			Washington		
Florida			Michigan			Oklahoma			West Virginia		
Georgia			Minnesota			Oregon			Wisconsin		
Guam			Mississippi			Pennsylvania			Wyoming		
Hawaii			Missouri			Puerto Rico					

9.	Will this branch office and/or individuals at this branch office operate pursuant to a written agreement or contract with the <i>applicant's</i> main office?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
10.	Will this branch office have sole responsibility for decisions relating to individuals originating or soliciting mortgage loans: (a) with respect to employment? (b) with respect to compensation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
11.	Does any <i>person</i> , other than the <i>applicant</i> , have responsibility, directly or indirectly, for paying the expenses of this branch office or otherwise have a financial interest in this branch office or its activities? (a) If yes, provide an explanation of the expense payment and/or financial interest arrangement: (b) If yes, provide the following information for each <i>person</i> responsible for the expenses or with a financial interest:	YES <input type="checkbox"/>	NO <input type="checkbox"/>

FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)	Address, City, State/Province, Zip/Postal Code	Telephone	IRS Tax No., SSN, or Employer ID#	Separately Licensed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

UNIFORM MORTGAGE BIOGRAPHICAL STATEMENT & CONSENT FORM FORM MU2 INSTRUCTIONS

A. GENERAL INSTRUCTIONS

9. **FILING** – Form(s) MU2 must accompany Form MU1, the Uniform Mortgage Lender/Mortgage Broker form. Each individual identified as a *control person* for the *applicant* on Schedule A of Form MU1, must complete Form MU2. An *applicant* must also refer to *jurisdiction*-specific requirements published by each *jurisdiction* in which it is applying. Some *jurisdictions* may require biographical information about people that do not fit the *control person* definition, like a branch manager. Such *jurisdictions* may therefore request a Form MU2 with other filings. Additionally, *applicants* must update the roster of *control persons* on Form MU1 by filing a Schedule C, thus requiring additional MU2 forms.
10. **EMPLOYMENT REPRESENTATION** – The employment representation section must be completed by an authorized representative of the *applicant*.
11. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases.
12. **DATES** – The filing date is the date *applicant* submits this form to the *jurisdiction(s)*. The desired effective date is the date *applicant* would like the license/registration or amendment to become effective. Review published *jurisdiction*-specific requirements for effective date expectations.
13. **AMENDMENTS** – The *applicant* must update biographical information as required in each *jurisdiction* by submitting amendments using Form MU2. On Form MU2, circle or otherwise identify the item being amended. Complete only items 1(A) and 1(I), as well as the information that is being amended. Review published *jurisdiction*-specific requirements concerning the return of the prior original license/registration document when submitting the amended Form MU2.

B. FILING INSTRUCTIONS

4. FORMAT

- A. Each individual identified as a *control person* on Schedules A or C must complete Form MU2. A fully completed Form MU2 for each *control person* is required to be submitted to each *jurisdiction* along with the *applicant's* initial Form MU1. Form MU2 also accompanies Schedule C when reporting new *control person(s)*. The *applicant* should review published *jurisdiction*-specific requirements for additional specific filing requirements using Form MU2 providing biographical information about non-*control persons*.
- B. Type all information.
- C. Use only the current version of Form MU2 or a reproduction of it.
- D. The Acknowledgment & Consent section must include notarized original manual signature.
- E. The Mortgage Lender/Mortgage Broker Employment Representation section must include original manual signature.
- F. Employment history, item 6: provide the full legal name of the company, beginning with your current employer. For the purposes of this history, include both 1099 independent contractor assignments as well as W-2 status employment.

5. **ATTACHMENTS** - Review published *jurisdiction*-specific for required attachments including but not limited to:
 - A. Review published *jurisdiction*-specific instructions concerning attachments in PDF or alternative formats.
 - B. Two Fingerprint Cards, if required by applicable *jurisdiction(s)*, per item 4 of Form MU2
 - C. Personal credit report, bond, or other demonstration of financial responsibility
 - D. Depending on the *jurisdiction*, individual(s) originating mortgage loans at the business

may need to file a Form MU4. Review published *jurisdiction*-specific requirements for details.

E. Fees

C. **EXPLANATION OF TERMS** – The following terms are italicized throughout Form MU2

1. **GENERAL**

APPLICANT – The mortgage lender or mortgage broker applying on or amending information on Form MU1 (including schedules) or Form MU3. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.

CONTROL – The power, directly or indirectly, to direct the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any *person* that (i) is a director, general partner or executive officer; (ii) directly or indirectly has the right to vote 10% or more of a class of a voting security or has the power to sell or direct the sale of 10% or more of a class of voting securities; (iii) in the case of an LLC, Managing Member; or (iv) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 10% or more of the capital, is presumed to control that company.

CONTROL PERSON – An individual (a natural person) named on Form MU1 in Item 1A or in Schedules A, B, or C that directly or indirectly exercises *control* over the *applicant*.

JURISDICTION – A state, the District of Columbia, the Commonwealth of Puerto Rico, any territory of the United States, or any subdivision or regulatory body thereof.

PERSON – An individual, partnership, corporation, trust, LLC, or other organization.

2. **FOR THE PURPOSE OF ITEM 8**

CHARGED – Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

ENJOINED – Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

FELONY – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *felony* is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

FINANCIAL SERVICES OR FINANCIAL SERVICES-RELATED – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to; acting as or being associated with a bank or savings association, credit union, mortgage lender, mortgage broker, real estate salesperson or agent, closing agent, title company, or escrow agent).

FOREIGN FINANCIAL REGULATORY AUTHORITY – Includes (1) a *financial services* authority of a foreign country; (2) other governmental body empowered by a foreign government to administer or enforce its laws relating to the regulation of *financial services* or *financial services-related* activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in *financial services* activities listed above.

FOUND – Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

INVOLVED – Doing an act or omission or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act or omission.

MISDEMEANOR – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *misdemeanor* is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

ORDER – A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations,

undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an *order*.

PROCEEDING – Includes a formal administrative or civil action initiated by a governmental agency, self-regulatory organization or a *foreign financial regulatory authority*; a *felony* criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). The term does not include other civil litigation, investigations, or arrests or similar charges affected in the absence of a formal criminal indictment or information (or equivalent formal charge).

FORM MU2	BIOGRAPHICAL STATEMENT & CONSENT UNIFORM MORTGAGE LENDER/MORTGAGE BROKER FORM					
Date of filing (MM/DD/YYYY): _____			Desired Effective Date (MM/DD/YYYY): _____			
License Number information (if applicable) is optional. Use additional sheets if necessary.	License #	<i>Jurisdiction</i>	License #	<i>Jurisdiction</i>	License #	<i>Jurisdiction</i>
	License #	<i>Jurisdiction</i>	License #	<i>Jurisdiction</i>	License #	<i>Jurisdiction</i>
<input type="checkbox"/> NEW APPLICATION <input type="checkbox"/> AMENDMENT <i>To amend, circle or identify items being amended.</i>						
1. Individual's identifying information:						
(A) Full last, first and middle names:						
_____	_____	_____	_____	_____	_____	_____
Last Name		First Name		Full Middle Name		Suffix (if any)
(B) Social Security Number: _____			(C) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female			
(D) Date of Birth (MM/DD/YYYY) _____		(E) State/Province of Birth: _____		(F) Country of Birth: _____		
(G) List all names(s) , other than your legal name, you have used or are using, or by which you are or were known since the age of 18. This field should include for example, nicknames, aliases, and names used before or after marriage. (Use additional sheets as necessary).						
Name _____	Name _____	Name _____	Name _____	Name _____	Name _____	Name _____
(H) For amendments only: If this filing reports that an individual's name has changed, enter the new name and attach supporting legal documentation:						
_____	_____	_____	_____	_____	_____	_____
Last Name		First Name		Full Middle Name		Suffix (if any)
(I) Employer Name (Mortgage Lender/Mortgage Broker): _____						
(J) Office of Employment address: (do not use a P.O. Box) check this box.						<input type="checkbox"/> If this address is your private residence,
_____	_____	_____	_____	_____	_____	_____
Number & Street		City	State / Province & Country		Zip+4 / Postal Code	
(K) Current Residence address (if different from employment address):						
_____	_____	_____	_____	_____	_____	_____
Number & Street		City	State / Province & Country		Zip+4 / Postal Code	
(L) Telephone Numbers and e-mail address:						
() _____	() _____	() _____	_____			_____
Business Phone		Cell Phone (optional)		Fax Line (optional)		e-mail address (optional)
2. Individual's Acknowledgment & Consent:						
I swear or affirm that I have executed this form before a Notary Public, of my own free will and:						
(A) I have read and understand the items and instructions on this form;						
(B) My answers (including attachments) are true and complete to the best of my knowledge;						
(C) I understand that I am subject to administrative, civil or criminal penalties if I give false or misleading answers;						
(D) I authorize all my current and former <i>employers</i> , law enforcement agencies, and any other <i>person</i> to furnish to any <i>jurisdiction</i> , or any agent acting on its behalf, any information they have, including without limitation my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former <i>employers</i> , complete reasons for my termination;						
(E) I have read and understand applicable federal and state law, and will be in compliance at all times;						
(F) I promise to keep the information contained in this form current and to file accurate supplementary information on a timely basis.						
Notary seal here	Date (MM/DD/YYYY) Signed or attested before me: _____ on this _____ Date	Print Notary Public name _____ day of _____, Month	Signature of individual by _____ Print individual's name _____ at _____ Year State County	_____	_____	_____
Notary Public signature			Notary Appointment Expires (MM/DD/YYYY)			
<i>Individual's Acknowledgment & Consent must always be completed in full with original, manual signature and notarization. Affix notary stamp or seal where applicable.</i>						

Applicant full legal name: _____

Individual's full legal name: _____

<p>7. Other Business: Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude non-<i>financial services-related</i> activity that is exclusively charitable, civic, religious, or fraternal and is recognized as tax exempt.) If YES, provide the following details: the name of the other business; whether the business is <i>financial services-related</i>; the address of the other business; the nature of the other business; your position, title, or relationship with the other business; the start date of your relationship; the approximate number of hours per month you devote to the other business; and briefly describe your duties relating to the other business. (Attach additional sheets as needed.)</p> <p>Details:</p>	<p>YES</p> <p><input type="checkbox"/></p>	<p>NO</p> <p><input type="checkbox"/></p>
<p>8. Disclosures: If the answer to any of the following is "YES", provide complete details of all events or proceedings in an attachment. Refer to the explanation of terms section of the instructions for explanations of italicized terms.</p>		
<p style="text-align: center;">Financial Disclosure</p> <p>(A) Within the past ten years:</p> <p>(1) have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition?</p> <p>(2) based upon events that occurred while you exercised <i>control</i> over any organization, have any filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?</p> <p>(B) Has a bonding company ever denied, paid out on, or revoked a bond for you?</p> <p>(C) Do you have any unsatisfied judgments or liens against you?</p>	<p>YES</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>NO</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
<p style="text-align: center;">Criminal Disclosure</p> <p>(D) Have you ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>?</p> <p>(2) been <i>charged</i> with any <i>felony</i>?</p> <p>(E) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>?</p> <p>(2) been <i>charged</i> with any <i>felony</i>?</p> <p>(F) Have you ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor involving: financial services</i> or a <i>financial services-related</i> business; any fraud, false statements, or omissions; any theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or a conspiracy to commit any of these offenses?</p> <p>(2) been <i>charged</i> with a <i>misdemeanor</i> specified in 8(F)(1)?</p> <p>(G) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor</i> specified in 8(F)(1)?</p> <p>(2) been <i>charged</i> with a <i>misdemeanor</i> specified in 8(F)(1)?</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>

Applicant full legal name: _____

Individual's full legal name: _____

Regulatory Action Disclosure	YES	NO
(H) Has any State or federal regulatory agency or <i>foreign financial regulatory authority</i> ever: (1) <i>found</i> you to have made a false statement or omission or been dishonest, unfair or unethical? (2) <i>found</i> you to have been <i>involved</i> in a violation of a <i>financial services-related</i> regulation(s) or statute(s)? (3) <i>found</i> you to have been a cause of a <i>financial services-related</i> business having its authorization to do business denied, suspended, revoked or restricted? (4) entered an <i>order</i> against you in connection with a <i>financial services-related</i> activity? (5) denied, suspended, or revoked your registration or license, disciplined you, or otherwise by <i>order</i> , prevented you from associating with a <i>financial services-related</i> business or restricted your activities? (6) denied, suspended, or revoked your registration or license, disciplined you, or otherwise by <i>order</i> , prevented you from associating with a <i>financial services-related</i> business or restricted your activities? (7) barred you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in a <i>financial services-related</i> business? (8) issued a final <i>order</i> based on violations of any law or regulations that prohibit fraudulent, manipulative, or deceptive conduct? (I) Have you ever had an authorization to act as an attorney, accountant, or State or federal contractor that was revoked or suspended? (J) Are you now the subject of any regulatory <i>proceeding</i> that could result in a "yes" answer to any part of 8(H) or 8(I)?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Civil Judicial Disclosure		
(K) (1) Has any domestic or foreign court ever: (a) <i>enjoined</i> you in connection with any <i>financial services-related</i> activity? (b) <i>found</i> that you were <i>involved</i> in a violation of any <i>financial services-related</i> statute(s) or regulation(s)? (c) dismissed, pursuant to a settlement agreement, a <i>financial services-related</i> civil action brought against you by a State, federal, or <i>foreign financial regulatory authority</i> ? (2) Are you named in any pending <i>financial services-related</i> civil action that could result in a "yes" answer to any part of 8K(1)?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Customer Arbitration/Civil Litigation Disclosure		
(L) Have you ever been named as a respondent/defendant in a <i>financial services-related</i> consumer-initiated arbitration or civil litigation which: (1) is still pending; or (2) resulted in an arbitration award or civil judgment against you, regardless of amount, or that required corrective action; or (3) was settled for any amount?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Termination Disclosure		
(M) Have you ever voluntarily resigned, been discharged, or permitted to resign after allegations were made that accused you of: (1) violating statute(s), regulation(s), rule(s), or industry standards of conduct? (2) fraud, dishonesty, theft, or the wrongful taking of property?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

C.L."BUTCH" OTTER
GOVERNOR

GAVIN M. GEE
DIRECTOR

STATE OF IDAHO
DEPARTMENT OF FINANCE
800 Park Blvd Ste 200 – BOISE ID 83712
P O BOX 83720 - BOISE ID 83720-0031
TELEPHONE: (208) 332-8002
FAX: (208) 332-8096
<http://finance.idaho.gov>



IDAHO MORTGAGE LOAN ORIGINATOR APPLICATION
Jurisdiction-Specific Requirements for the State of Idaho
Form MU4 Uniform Mortgage Loan Originator License Application

The following items must be included with any submission for a mortgage loan originator license in addition to the requirements of the uniform application form. Fingerprints are not required in Idaho at this time. Amendments to the Form MU4 require full execution and notary.

1. **Mortgage Loan Originators:** Individuals desiring to conduct mortgage loan origination activity in Idaho as defined in Idaho Code § 26-3102(20), regardless of title or position, must be licensed prior to commencing origination activity unless exempt under Idaho Code § 26-3103, or individual is conducting origination activity as a sole proprietor exclusive to themselves. File Form MU4, with appropriate fee and bond, for each individual.
2. The affiliated employer and physical work location of each loan originator must be licensed prior to issuance of any loan originator license.
3. Verification of employer relationship establishment (hire) and/or termination of employer relationship (as in a job change) must be completed prior to issuance of any new license.
4. **Application Fee:** \$200.00 payable to the Idaho Department of Finance. There are no fees charged for amendments such as name or address changes, corrections, or employer affiliations. A new full complete application package and full fee will be required if the license is terminated or lost for any reason (such as failure to renew, revocations, etc).
5. **Renewal Fee:** \$100 annually.
6. **Financial Responsibility/Surety Bond or Certificate of Deposit:** Bond or CD must be provided in the amount of \$10,000. The *original* bond or CD must be provided to this office if a new bond or CD is submitted. The bond must be fully executed by both the surety company and applicant. Subsequent changes to the bond may be in the form of a fully executed rider and may be a copy. A CD must be payable to the Idaho Department of Finance, with interest payable to the individual. A CD must remain in place for a period of three (3) years after cessation of Idaho licensure. Instructions for a CD in lieu of surety bond are available on the Department's website at <http://finance.idaho.gov> in the "loan originator and mortgage forms" section. **NOTE: The name of the principal insured individual on the bond/CD must match EXACTLY to the name shown in section 1A of the Form MU4.**
7. **Employment Relationship Establishment or Termination:** Must be completed and filed by employing/contracting company licensee only. Complete applicable portions of the Form MU4 as indicated in the uniform instructions.

License Surrender/Withdrawal: Must be completed and filed by loan originator *licensee only*. An employing or contracting company licensee cannot surrender a license---it may only terminate a employment or contractual relationship.
8. **Still need help?** Contact the licensing staff at 208-332-8002 or visit the FAQ section for loan originators at <http://finance.idaho.gov>.

Delivery

Please keep copies of everything submitted to the Department of Finance.

USPS

PO Box 83720
Boise, ID 83720-0031

Overnight/Other Carriers

800 Park Blvd Ste 200
Boise, ID 83712

Please submit all items simultaneously. Failure to submit a completed application may result in the denial of the application submission. Based on review of the submitted information, additional documents or information may be required. If you have not received any form of communication within 30 days of the Department's receipt of a complete application you may contact 208.332.8002 for a status. Status checks requested under 30 days will delay your application process. The Department is allotted 60 days for review of a complete application by statute. All approved licensees are posted to the Department's website daily.

YOU ARE NOT AUTHORIZED TO ENGAGE IN LOAN ORIGINATION, MORTGAGE BROKERING, OR MORTGAGE LENDING ACTIVITIES IN IDAHO UNTIL YOU HAVE RECEIVED A LICENSE AS AN ENTITY AND NO LOAN ORIGINATOR IS AUTHORIZED TO ENGAGE IN MORTGAGE LOAN ORIGINATION ACTIVITIES UNTIL THEY HAVE RECEIVED A LICENSE OR PROVIDED EVIDENCE OF EXEMPTION.

FORM MU4 INSTRUCTIONS

A. GENERAL INSTRUCTIONS

14. **FILING** – Form MU4 is the Uniform Individual Mortgage License/Registration & Consent form. Any *applicant* for an individual mortgage license/registration may use this form to apply to *jurisdictions* that have adopted the Form MU4. The *applicant* must also refer to *jurisdiction*-specific requirements published by each *jurisdiction* in which he/she is applying.
15. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases.
16. **DATES** – The filing date is the date *applicant* submits this form to the *jurisdiction(s)*. The desired effective date is the date *applicant* would like this license/registration or amendment to become effective. Review published *jurisdiction*-specific requirements for effective date expectations.
17. **AMENDMENTS** – The *applicant* must update information as required in each applicable *jurisdiction* by submitting amendments using Form MU4. Circle (or otherwise identify) and complete the information that is being amended as well as the name of the *applicant* and license number where applicable.
 - A. Review published *jurisdiction*-specific requirements concerning the return of the prior original license/registration document when submitting the amended Form MU4.
 - B. If the amendment filing is to change the individual's name, enter the old name in item 1(A) and the new name in item 1(H). Appropriate supporting documentation includes, but is not limited to, copies of marriage certificates, divorce decrees, or other legal documents evidencing both the prior and new names.
18. **ESTABLISH RELATIONSHIP** – *Applicants* may apply to establish a relationship (e.g.: employer, sponsor, etc) **(a)** with a new license/registration application or **(b)** by filing an amendment. Some *jurisdictions* allow employers to submit the MU4 form on behalf of the *applicant* to establish employment. Existing licensees/registrants complete items 1(A), 1(I) through 1(K), 4, 5. The employer or sponsor (or equivalent) completes item 3(A). Review published *jurisdiction*-specific requirements for specific instructions related to establishing a relationship.
19. **TERMINATE RELATIONSHIP** – For the purposes of this form, “terminate” refers to the ending of a relationship between the individual and the company. *Applicants*, employers or sponsors (or equivalent) may submit the MU4 form to notify *jurisdictions* that an individual has left the relationship. Complete items 1(A), 3(B), and 5. Review published *jurisdiction*-specific requirements for instructions pertaining to terminating an individual license/registration.
20. **SURRENDER / CANCEL** – When an *applicant* decides to cease activity under the license/registration, use the Form MU4 to notify *jurisdiction(s)* by checking the “surrender/cancel” box. Use this notification for various reasons including voluntarily leaving the industry or *jurisdiction*, surrender in lieu of revocation, gained exemption status, etc. Complete items 1(A) and 5 then send the original license/registration document (if any was issued) to the *jurisdiction(s)* along with the Form MU4. Review published *jurisdiction*-specific requirements concerning additional specific requirements at surrender/cancel.
21. **OTHER** – Use this box only after reviewing published *jurisdiction*-specific requirements.
22. **RELATIONSHIP REPRESENTATION** – The relationship (e.g.: employment, sponsorship) representation section must be completed by an authorized representative of the employer or sponsor. Review published *jurisdiction*-specific requirements for applicability of this section.

B. FILING INSTRUCTIONS

6. FORMAT

- A. A fully completed Form MU4 is required to be submitted to each *jurisdiction* where the *applicant* is filing. The *applicant* should contact the appropriate *jurisdiction(s)* for specific filing requirements, including applicable fees.
 - B. Type all information.
 - C. Use only the current version of Form MU4 or a reproduction of it.
 - D. The Acknowledgment & Consent (item 2) must include notarized original manual signature.
 - E. Employment history, item 7: provide the full legal name of the company, beginning with your current employer. For the purposes of this history, include both 1099 independent contractor assignments as well as W-2 status employment.
7. **ATTACHMENTS** - Review *jurisdiction*-specific requirements for additional attachments including but not limited to:
- A. Two fingerprint cards if required by applicable *jurisdiction(s)* per item 4 of Form MU4.

- B. Personal credit report or other demonstration of financial responsibility
- C. Pre-license or continuing education
- D. Pre-license testing
- E. Fees

C. EXPLANATION OF TERMS – The following terms are italicized throughout Form MU4

1. GENERAL

APPLICANT – The individual applying on or amending information on this form.

CONTROL – The power, directly or indirectly, to direct the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any *person* that (i) is a general partner or executive officer, including Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, Chief Compliance Officer, Director, and individuals with similar status or functions; (ii) directly or indirectly has the right to vote 10% or more of a class of a voting security or has the power to sell or direct the sale of 10% or more of a class of voting securities; or (iii) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 10% or more of the capital, is presumed to control that company.

JURISDICTION – A state, the District of Columbia, the Commonwealth of Puerto Rico, any territory of the United States, or any subdivision or regulatory body thereof.

PERSON – An individual, partnership, corporation, trust, or other organization.

2. FOR THE PURPOSE OF ITEM 9

CHARGED – Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

ENJOINED – Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

FELONY – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *felony* is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

FINANCIAL SERVICES OR FINANCIAL SERVICES RELATED – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to; acting as or being associated with a bank or savings association, credit union, mortgage lender, mortgage broker, real estate salesperson or agent, closing agent, title company, or escrow agent).

FOREIGN FINANCIAL REGULATORY AUTHORITY – Includes (1) a *financial services* authority of a foreign country; (2) other governmental body empowered by a foreign government to administer or enforce its laws relating to the regulation of *financial services* or *financial services-related* activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in *financial services* activities listed above.

FOUND – Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

INVOLVED – Doing an act or omission or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act or omission.

MISDEMEANOR – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *misdemeanor* is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

ORDER – A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an *order*.

PROCEEDING – Includes a formal administrative or civil action initiated by a governmental agency, self-regulatory organization or a *foreign financial regulatory authority*; a *felony* criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). The term does not include other civil litigation, investigations, or arrests or similar charges affected in the absence of a formal criminal indictment or information (or equivalent formal charge).

Applicant full legal name (last, first, middle): _____

3. Mortgage Broker/Mortgage Lender Relationship Representation:

(A) **ESTABLISH RELATIONSHIP** To the best of my knowledge and belief, at the time of approval, the *applicant* will be familiar with the statutes, regulations, and rules of the *jurisdiction(s)* with which this application is being filed, and will be fully qualified for the position for which application is being made herein. I have taken appropriate steps to verify the accuracy and completeness of the information contained in and with this application. I have provided the *applicant* an opportunity to review the information contained herein and the *applicant* has approved this information and signed the form.

Relationship Effective Date (MM/DD/YYYY): _____

_____ by _____
 Company Name Signature of authorized party Print Name and Title of authorized party

(B) **TERMINATE RELATIONSHIP** I have taken appropriate steps to verify the accuracy and completeness of the information contained in and with this application for termination of an individual license/registration.

Termination Effective Date (MM/DD/YYYY): _____

_____ by _____
 Company Name Signature of authorized party Print Name and Title of authorized party

Reason for termination (optional):

- Deceased on date (MM/DD/YYYY) _____
- Voluntary Resignation
- Permitted to Resign – Explanation _____
- Discharged – Explanation _____

Relationship Representation must always be completed in full with original, manual signature.

4. Fingerprint Information filing representation:

- I represent that I am submitting, have submitted, or promptly will submit to the appropriate jurisdiction(s) two fingerprint cards as required.
- I am applying for a mortgage individual license/registration only in jurisdiction(s) that do not require me to submit fingerprint cards.

5. Enter appropriate number in the box for each jurisdiction:

Enter "1" if you are **newly applying** in that *jurisdiction* as a mortgage individual.
 Enter "2" if you have a **pending application** in that *jurisdiction* as a mortgage individual.
 Enter "3" if you are **already licensed/registered** in that *jurisdiction* as a mortgage individual.
 Enter "4" if you are **surrendering/canceling** in that *jurisdiction* as a mortgage individual.
 Enter "5" if you were **formerly licensed/registered** in that *jurisdiction* as a mortgage individual.

Alabama		Georgia		Maryland		New Mexico		South Dakota	
Alaska		Guam		Massachusetts		New York		Tennessee	
Arizona		Hawaii		Michigan		North Carolina		Texas – OCCC	
Arkansas		Idaho		Minnesota		North Dakota		Texas – SML	
California – DOC		Illinois		Mississippi		Ohio		Utah	
California – DRE		Indiana		Missouri		Oklahoma		Vermont	
Colorado		Iowa		Montana		Oregon		Virginia	
Connecticut		Kansas		Nebraska		Pennsylvania		Washington	
Delaware		Kentucky		Nevada		Puerto Rico		West Virginia	
District of Columbia		Louisiana		New Hampshire		Rhode Island		Wisconsin	
Florida		Maine		New Jersey		South Carolina		Wyoming	

Applicant full legal name (last, first, middle): _____

<p>9. Disclosures: If the answer to any of the following is "YES", provide complete details of all events or <i>proceedings</i> in an attachment. Refer to the explanation of terms section of the instructions for explanations of italicized terms including, as applicable, name and location of court, docket/case number, and status and summary of event or <i>proceeding</i>.</p>			
Financial Disclosure		YES	NO
<p>(A) Within the past ten years:</p> <p>(1) have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition?</p> <p>(2) based upon events that occurred while you exercised <i>control</i> over any organization, have any filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?</p>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<p>(B) Has a bonding company ever denied, paid out on, or revoked a bond for you?</p>		<input type="checkbox"/>	<input type="checkbox"/>
<p>(C) Do you have any unsatisfied judgments or liens against you?</p>		<input type="checkbox"/>	<input type="checkbox"/>
Criminal Disclosure			
<p>(D) Have you ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>?</p> <p>(2) been <i>charged</i> with any <i>felony</i>?</p>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<p>(E) Based upon the activities that occurred while you exercised <i>control</i> over it, has any organization ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>?</p> <p>(2) been <i>charged</i> with any <i>felony</i>?</p>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<p>(F) Have you ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor involving: financial services</i> or a <i>financial services-related</i> business; any fraud, false statements, or omissions; any theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or a conspiracy to commit any of these offenses?</p> <p>(2) been <i>charged</i> with a <i>misdemeanor</i> specified in 9(F)(1)?</p>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<p>(G) Based upon the activities that occurred while you exercised <i>control</i> over it, has any organization ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor</i> specified in 9(F)(1)?</p> <p>(2) been <i>charged</i> with a <i>misdemeanor</i> specified in 9(F)(1)?</p>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Civil Judicial Disclosure			
<p>(H) (1) Has any domestic or foreign court ever:</p> <p>(a) <i>enjoined</i> you in connection with any <i>financial services-related</i> activity?</p> <p>(b) <i>found</i> that you were <i>involved</i> in a violation of any <i>financial services-related</i> statute(s) or regulation(s)?</p> <p>(c) dismissed, pursuant to a settlement agreement, a <i>financial services-related</i> civil action brought against you by a State, federal, or <i>foreign financial regulatory authority</i>?</p>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>(2) Are you named in any pending <i>financial services-related</i> civil action that could result in a "yes" answer to any part of 9(H)(1)?</p>		<input type="checkbox"/>	<input type="checkbox"/>

Applicant full legal name (last, first, middle): _____

Regulatory Action Disclosure	YES	NO
(I) Has any State or federal regulatory agency or <i>foreign financial regulatory authority</i> ever:		
(1) <i>found</i> you to have made a false statement or omission or been dishonest, unfair or unethical?	<input type="checkbox"/>	<input type="checkbox"/>
(2) <i>found</i> you to have been <i>involved</i> in a violation of a <i>financial services-related</i> regulation(s) or statute(s)?	<input type="checkbox"/>	<input type="checkbox"/>
(3) <i>found</i> you to have been a cause of a <i>financial services-related</i> business having its authorization to do business denied, suspended, revoked or restricted?	<input type="checkbox"/>	<input type="checkbox"/>
(4) entered an <i>order</i> against you in connection with a <i>financial services-related</i> activity?	<input type="checkbox"/>	<input type="checkbox"/>
(5) denied, suspended, or revoked your registration or license, disciplined you, or otherwise by <i>order</i> , prevented you from associating with a <i>financial services-related</i> business or restricted your activities?	<input type="checkbox"/>	<input type="checkbox"/>
(6) denied, suspended, or revoked your registration or license, disciplined you, or otherwise by <i>order</i> , prevented you from associating with a <i>financial services-related</i> business or restricted your activities?	<input type="checkbox"/>	<input type="checkbox"/>
(7) barred you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in a <i>financial services-related</i> business?	<input type="checkbox"/>	<input type="checkbox"/>
(8) issued a final <i>order</i> based on violations of any law or regulations that prohibit fraudulent, manipulative, or deceptive conduct?	<input type="checkbox"/>	<input type="checkbox"/>
(J) Have you ever had an authorization to act as an attorney, accountant, or State or federal contractor that was revoked or suspended?	<input type="checkbox"/>	<input type="checkbox"/>
(K) Are you now the subject of any regulatory <i>proceeding</i> that could result in a "yes" answer to any part of 9(I) or 9(J)?	<input type="checkbox"/>	<input type="checkbox"/>
Customer Arbitration/Civil Litigation Disclosure		
(L) Have you ever been named as a respondent/defendant in a <i>financial services-related</i> consumer-initiated arbitration or civil litigation which:		
(1) is still pending; or	<input type="checkbox"/>	<input type="checkbox"/>
(2) resulted in an arbitration award or civil judgment against you, regardless of amount, or that required corrective action; or	<input type="checkbox"/>	<input type="checkbox"/>
(3) was settled for any amount?	<input type="checkbox"/>	<input type="checkbox"/>
Termination Disclosure		
(M) Have you ever voluntarily resigned, been discharged, or permitted to resign after allegations were made that accused you of:	<input type="checkbox"/>	<input type="checkbox"/>
(1) violating statute(s), regulation(s), rule(s), or industry standards of conduct?	<input type="checkbox"/>	<input type="checkbox"/>
(2) fraud, dishonesty, theft, or the wrongful taking of property?	<input type="checkbox"/>	<input type="checkbox"/>



STATE OF IDAHO
 DEPARTMENT OF FINANCE
 Consumer Finance Bureau
 800 Park Blvd Ste 200, Boise, ID 83712
 P.O. Box 83720
 (208) 332-8000
 Boise, ID 83720-0031

BOND # _____
Effective date _____ 20____

SURETY BOND FOR MORTGAGE LOAN ORIGINATOR

KNOW ALL MEN BY THESE PRESENTS, that, pursuant to the requirements of Idaho Code § 26-3110(2), I, _____, as Principal, and _____, a corporation duly incorporated under the laws of the state of _____, and authorized to do business in the state of Idaho, as Surety, are held and firmly bound unto the State of Idaho in the penal sum of Ten Thousand Dollars (\$10,000), for the payment of which we hereby bind ourselves, our and each of our heirs, assigns, executors and administrators, jointly and severally, firmly by these presents.

In the event that the Principal or any employee or agent of the Principal has violated any provision of the Idaho Residential Mortgage Practices Act, Idaho Code § 26-3101, *et seq.*, or of any rule or order promulgated or issued thereunder, or federal law or regulation pertaining to loan origination, mortgage lending or mortgage brokering activities as set forth in Idaho Code § 26-3102, and has damaged any person by such violation, then the bond shall be forfeited and paid by the Surety to the State of Idaho for the benefit of any person so damaged.

This bond shall be a continuing obligation of the Surety. The Surety's liability under this bond for any claim that is made thereunder, either individually or in the aggregate, shall in no event exceed the penal amount of the bond issued.

PROVIDED, FURTHER, that the Surety may cancel this bond as an entirety by giving thirty (30) days' written notice by registered mail to the Idaho Department of Finance at Boise, Idaho and to the Principal hereunder. In case of such cancellation by the Surety, no further obligation shall be incurred under this bond after the expiration of said thirty (30) days, but the liability of the Principal and Surety shall apply as above set out as to any violations which may have occurred prior to the effective date of such cancellation.

 (NAME OF PRINCIPAL/LOAN ORIGINATOR – Please print)

 (SIGNATURE OF PRINCIPAL/LOAN ORIGINATOR) Date

 (NAME OF SURETY COMPANY)

 (SIGNATURE OF OFFICER OF SURETY COMPANY) Date

 (TITLE OF SURETY COMPANY OFFICER)

(Effective Date of Form: 12/06)