BRANCH OFFICE REGISTRATION FORM FOR COLLECTION AGENCIES, DEBT/CREDIT COUNSELORS, DEBT SETTLEMENT COMPANIES, DEBT BUYERS, AND CREDIT REPAIR ORGANIZATIONS FORM CA3 INSTRUCTIONS

A. GENERAL INSTRUCTIONS

1. FILING – Form CA3 is the Branch Office Registration Form accompanying the Form CA1 - License Application Form for Collection Agencies, Debt/Credit Counselors, Debt Settlement Companies, Debt Buyers, & Credit Repair Organizations.

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/licensee.

4. DATES – The filing date is the date applicant submits this form to the Idaho Department of Finance. The desired effective date is the date applicant/licensee would like this registration or amendment to become effective.

5. AMENDMENTS – The applicant/licensee must update information about a branch office by submitting amendments using Form CA3. When making changes to an existing branch 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.

6. CONTACT EMPLOYEE – The individual listed on the applicant’s Form CA1 (company’s main office) as the contact employee will be contacted by the Idaho Department of Finance, if needed, about this branch Form CA3.

7. RECORDS – Please identify where records will be kept if the applicant/licensee intends to maintain records for the branch office at a location other than the main address of the applicant/licensee or the location specified in item 2(C) on Form CA1.

8. SURRENDER / CANCEL– When an applicant/licensee decides to cease operations under this branch registration, at one or more branch locations, use the Form CA3 to notify the Idaho Department of Finance by checking the “surrender” box and completing only items 2, 7, and 8. Submit a separate Form CA3 for each branch registration that is being surrendered. Use the Form CA1 to notify the Department if the entire company will cease operations under the license/registration.

B. FILING INSTRUCTIONS

1. FORMAT
   A. Form CA3 may accompany a new company filing with Form CA1, or may follow the Form CA1 at a later date. A fully completed Form CA3 must be submitted when the applicant is filing for branch registration the first time.
   B. The Execution section must include a notarized original manual signature for the initial Form CA3 filing for each branch office.
   C. Type or print all information clearly and legibly.
   D. Use only the current version of Form CA3.

2. ATTACHMENTS
   A. Responsible Person in Charge (RPIC): This person must demonstrate a minimum of three (3) years’ experience specifically related to the type of business conducted by the licensee under the Idaho Collection Agency Act. This person does not have to be an owner, officer, member, partner or director. This person does not have to physically work from the main licensed office location; however, if the RPIC works from any other location, a toll-free number to reach this person during normal business hours must be provided to Idaho debtors and the Department. A verification of experience that includes detailed job descriptions, duties, experience and/or relevant education in each of the specific business activities to be conducted under this license. If multiple activities are to be conducted—such as collections and credit repair, three (3) years of experience in EACH activity must be documented and detailed. File a Form CA2 for the RPIC if different than the RPIC filed in Form CA1.
   B. Provide a file-stamped copy of the Certificate of Assumed Business Name issued by the Idaho Secretary of State (IDSOS) for use of any fictitious, trade or “doing business as” name(s) to be used in Idaho at this branch location if not previously filed and approved with the Department. Contact the IDSOS at 208.334.2300 for filing information.
   C. Individual(s) having contact with Idaho debtors or businesses while conducting business activities covered by the Idaho Collection Agency Act must be registered on the Notification of Agents/Collectors Form and pay a $20 Registration Fee per person (this is an annual fee after initial payment at the time of registration).
   D. There is no application fee for a branch registration.

C. EXPLANATION OF TERMS – The following terms are italicized throughout Form CA3

   1. APPLICANT – The collection agency, debt counselor, credit counselor, debt settlement company, debt buyer or credit repair organization applying on or amending information on this form for a branch registration. The only instance in which the applicant is an individual is in the case of a sole proprietorship.
   2. JURISDICTION – A state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.
   3. PERSON – An individual, partnership, corporation, trust or other organization.
**FORM CA3**

**BRANCH OFFICE REGISTRATION FORM FOR COLLECTION AGENCIES, DEBT/CREDIT COUNSELORS, DEBT SETTLEMENT COMPANIES, DEBT BUYERS, AND CREDIT REPAIR ORGANIZATIONS**

**Applicants full legal name:** ____________________________

**Date of filing (MM/DD/YYYY):**  
**Desired Effective Date (MM/DD/YYYY):**

1. **NEW APPLICATION**  
   **AMENDMENT:** Complete column items with “b” for the item(s) being amended.

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<td>6a.</td>
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2b. **NEW Physical address (Number and Street)**  
   **NEW Physical 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**

4b. **NEW Business (Area Code) and Telephone Number**  
   **NEW Branch website**

5b. **NEW Trade name or “dba” used at this branch**

6b. Each branch must have at least one Responsible Person in Charge (RPIC) with a completed and filed Form CA2 and verification of experience.

**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 Idaho Department of Finance may conduct any investigation in accordance with state law, into the background of the applicant for purposes of this registration;
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.
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<tr>
<th>Date (MM/DD/YYYY)</th>
<th>Signature of applicant’s representative</th>
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</table>

Signed or attested before me: __________________ by __________________

Print Notary Public name
Print applicant’s representative name

on this ______ day of ____________, ______ at ______

Date       Month       Year       State       County

Notary Public signature
Notary Appointment Expires (MM/DD/YYYY)

This execution must always be completed in full with original, manual signature and notarization. Affix notary stamp or seal where applicable.
7. Physical address of location where the official books and records generated by this branch office will be kept.

______________________________________________________________________________________________

☐ Check here if same as previously specified principal records location (Item 2C on Form CA1). If multiple custodians maintain records for this branch, attach a separate sheet and indicate the types of records each custodian keeps.

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<tr>
<th>Records Custodian Name</th>
<th>( ) Business Phone</th>
<th>( ) Fax Line</th>
<th>______________________ email address</th>
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<tbody>
<tr>
<td>Number &amp; Street</td>
<td>City ______________</td>
<td>State / Province &amp; Country __________</td>
<td>Zip+4 / Postal Code</td>
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8. Enter appropriate number in the box(es) for each jurisdiction:

Enter the CA box for collection agency/debt buyer, the DCC box for debt/credit counselor or Debt Settlement, and the CR box for credit repair.

Enter “1” if applicant is **newly applying** in that jurisdiction

Enter “2” if applicant has a **pending application** in that jurisdiction

Enter “3” if applicant is **already licensed/registered** in that jurisdiction

Enter “4” if applicant is **surrendering/canceling** in that jurisdiction

Enter “5” if applicant is **formerly licensed/registered** in that jurisdiction

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9. Will this branch office and/or individuals at this branch office operate pursuant to a written agreement or contract with the main office?  

Y  N

10. Will this branch office have sole responsibility for decisions relating to individuals collecting, settling debt, repairing credit, counseling or soliciting debtors or businesses for collection-related services:

(a) with respect to employment?  

Y  N

(b) with respect to compensation?  

Y  N