



JIM GIBBONS  
Governor

STATE OF NEVADA  
DEPARTMENT OF BUSINESS AND INDUSTRY  
DIVISION OF MORTGAGE LENDING  
400 W. King Street, Suite 101  
Carson City, NV 89703  
(775) 684-7060 Fax (775) 684-7061  
www.mld.nv.gov

DIANNE CORNWALL  
Director

JOSEPH L. WALTUCH  
Commissioner

**APPLICATION FOR CHANGE OF CONTROL  
(Mortgage Broker and Mortgage Banker)**

Mail to: Division of Mortgage Lending  
400 W. King Street, Suite 101  
Carson City, NV 89703

From:

Pursuant to NRS 645B.095 and NRS 645E.390, mortgage brokers and mortgage bankers are required to apply to the Commissioner of the Division of Mortgage Lending for approval of a change of control when a transfer of voting stock results in giving a person/entity, directly or indirectly, the power to direct the management and policy of a mortgage broker or mortgage banker, or a transfer of at least 25% of the outstanding voting stock of a mortgage broker or mortgage banker occurs. Pursuant to NAC 645B.057 and NAC 645E.315, the application for a change of control must be submitted to the Commissioner not later than 30 days before the proposed change.

THE ACQUIRING PERSON/ENTITY MUST COMPLETE THE FOLLOWING:

Corporate Name: \_\_\_\_\_

DBA name, if any: \_\_\_\_\_

Nevada Office Address: \_\_\_\_\_

Street Address

\_\_\_\_\_ NV \_\_\_\_\_

City

State

Zip

E-mail address for all correspondence: \_\_\_\_\_

Qualified Employee: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Person completing this form: \_\_\_\_\_

Telephone No. (If different than above): \_\_\_\_\_

Fax No. (If different than above): \_\_\_\_\_

Do you maintain any client trust accounts pursuant to \*\*NRS 645B.175?  Yes  No

\*\*Investor funds deposited directly with the broker, or funds related to third-party servicing of loans made by the broker; doesn't include fees for appraisal, credit, or other third-party costs.

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Do you arrange any private investor loans?  Yes  No

Name(s) Of Owner(s)	Percentage Of Interest Held (Must Total 100%)	Will The Owner Originate Loans Under The Nevada License?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

**1. Required Items:**

- Copy of Buy/Sell Agreement
- Non-Personal History Record on behalf of the acquiring person/entity
- Last two years financial statements on the acquiring person/entity
- \$500.00** non-refundable application fee. (Make check payable to "Division of Mortgage Lending.")

**2. Qualified Employee must submit:**

- Designation of Qualified Employee Form

**3. All owners of the company, each person who has the power to direct management and policy of the company and the qualified employee must submit:**

- Child Support Statement (Pursuant to NRS 645B and NRS 645E, required regardless of any support obligations.)
- Two completed fingerprint cards. (Cards are available at local law enforcement agencies. Only Form FD-258 will be accepted.)
- Personal History Record (including an explanation of "Yes" answers) completed, signed and notarized.
- Personal Financial Questionnaire.

Attach additional pages as necessary.

I, the undersigned, state that I am authorized to sign the within Application for Change of Control on behalf of the applicant named herein; that I have read and signed said Application for Change of Control and

know the contents thereof; and that the statements made therein are true. By signing below and initialing each page, I represent that I personally have completed this Application for Change of Control and verified the information contained herein.

APPLICANT'S SIGNATURE:

Name of Mortgage Banker or Mortgage Broker: \_\_\_\_\_

By: \_\_\_\_\_  
Authorized Signatory (Owner)

\_\_\_\_\_  
Name (print or type)

\_\_\_\_\_  
Date

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary public in and for the County of \_\_\_\_\_, State of \_\_\_\_\_

My commission expires \_\_\_\_\_

Notary Signature \_\_\_\_\_

Notary Seal