

Alaska Small Loan Company Renewal Application Checklist

GENERAL INSTRUCTIONS- To ensure there are no delays in the review of your application: Complete applications on enclosed forms. Processing of the application begins upon receipt of required documents and fees, an incomplete application delays processing.

All required forms, attached for your convenience, listed below:

- ❖ *Alaska Company Uniform Renewal Application*
- ❖ *MU2 Forms, as needed*
- ❖ *Bond Continuation Certificate & Bond Form*

Complete as a fill-in document, **we no longer accept hand-written applications**. Legible photocopies with original signatures are acceptable. All forms are to be fully completed. Insert "N/A" or "NOT Applicable" where appropriate. When space is insufficient, use a separate page. Information on inserted pages must reference appropriate questions by letter and number. The applicant provides, under oath, the application, supplemental pages, and other related information; filing at the address noted below.

ALASKA AUTHORITY

Alaska Statute 06.01.025 Records of the Department

- (a) Information in the records of the department obtained through the administration of this title is confidential, is not subject to subpoena, and may be revealed only with the consent of the department.

You are responsible for reviewing the **Small Loans Act** ([AS 06.20](#)) and **accompanying regulation** ([3 AAC 12](#)) to ensure familiarity and compliance.

FEES

| LICENSE TYPE | LICENSING FEE |
|-----------------------------------|--|
| Small Loan Company (AS 06.20.010) | \$500.00 for single location (non-refundable) |
| | \$2,000.00 for multiple locations (non-refundable) |

Please note you will receive an invoice for investigative fees related to the issuance of a new license.

For U.S. Postal Service:

State of Alaska, Department of Commerce, Community & Economic Development
Division of Banking & Securities
PO Box 110807, Juneau, AK 99811-0807

Alaska Small Loan Company Renewal Application Checklist

Complete ALL sections of the application and supplemental information. Be sure the application is signed and dated (unsigned applications are returned). Make a copy for your files.

An application to renew a small loan company shall be submitted **no later than December 1st**.

- Application Form - Starts on Page 3 of this pdf.
- Company Business Documents
 - Business Plan- Submit a business plan, *if changes have been made*, detailing the following but not limited to marketing/advertising strategies, products, target markets, fee schedule, operating structure, trade names, specifics for doing business with Alaska consumers, and other pertinent information to help the Division understand your business model.
 - Organizational Chart- Submit an organizational chart, *if changes have been made*, if applicant is owned by another entity or entities or person, or has subsidiaries or affiliated entities.
 - Management Chart- Submit an organizational chart, *if changes have been made*, showing the applicant's divisions, officers, and managers.
 - MU2 Form: Provide for *each new individual* listed on the Alaska Company Uniform Renewal Application, if applicable. Starts on Page 10 of this pdf.
 - a. Residential History- Give a complete address history for the past 10 years, starting with current address.
 - b. Employment History- Provide a complete employment history for the past 10 years. Account for all time including full & part-time employments, self-employment, military service, and homemaking. Also include periods such as unemployed, full-time student, extended travel, etc. Indicate by "YES" or "NO" whether this employment was *financial service-related business*.
- Surety Bond- Submit Bond Continuation Certificate, showing an expiration date on or after the expiration of renewed license, and bond form.

IMPORTANT REMINDER

Under [AS 06.20.190](#), the Annual Report for Small Loan Companies is due March 15 of each year.

Alaska Company Uniform Renewal Application Form

| | | |
|---|---|--|
| | | |
| Renewal Information | | |
| In order to expedite the renewal process, please indicate whether there has been a change made in the past calendar year. | | |
| Each line item corresponds to a field on the application. If you choose "Yes", please provide the correct information on the application. If you choose "No" on all line items, please print this page and the Attestation to submit with your renewal packet. | | |
| 1A | Entity Name | |
| 1B | Trade Name | |
| 1C | IRS Employer Identification Number (Social Security Number for sole proprietorship) | |
| 1D | Legal Status | |
| 1E | | |
| 1F | Fiscal Year End | |
| 1G | Stock Symbol (if publicly traded) | |
| 1H | Physical Address | |
| 1I | Mailing Address | |
| 1J | Website & Mobile App | |
| 1K | Business Communication | |
| 1L | Branches | |
| 1M | Other Trade Names | |
| 2A | Registered Agent | |
| 2B | Primary Contact | |
| 2C | Primary Compliance Contact | |
| 2D | Secondary Contact | |
| 2E | Books & Record Contact | |
| 3A | Executive Officers & Direct Owners | |
| 3B | Indirect Owners | |
| 4A | Affiliates/Subsidiaries | |
| 4B | Money Service Business Activity | |
| 4C | Consumer Finance Business Activity | |
| 4D | Debt Business Activity | |
| 4E | Other Business Activity | |
| 5A | Disclosures - Please read before choosing Yes or No | |
| 5B | Disclosures - Please read before choosing Yes or No | |
| 5C | Disclosures - Please read before choosing Yes or No | |
| 5D | Disclosures - Please read before choosing Yes or No | |
| 5E | Disclosures - Please read before choosing Yes or No | |
| 5F | Disclosures - Please read before choosing Yes or No | |
| 5G | Disclosures - Please read before choosing Yes or No | |
| 5H | Disclosures - Please read before choosing Yes or No | |
| 5I | Disclosures - Please read before choosing Yes or No | |
| 5J | Disclosures - Please read before choosing Yes or No | |

Alaska Company Uniform Renewal Application Form

| 1. Admin. Information | | | | | | | | | |
|--|--|--------|--|-------------------|--|--------------|--|-------------|--|
| A. Entity Name (Sole Proprietors provide Last, First, and Full Middle Name) | | | | | | | | | |
| B. Trade Name for conducting business in Alaska: | | | | | | | | | |
| C. IRS Employer Identification Number (Social Security Number for sole proprietorship) | | | | | | | | | |
| D. Indicate legal status of licensee: | | | | | | | | | |
| E. If other than a sole proprietorship, indicate date and place the entity obtained its legal status (i.e., state or country where incorporated, where partnership agreement was filed, or where licensee entity was formed): | | | | | | | | | |
| Formation State | | | | Formation Country | | | | | |
| F. Fiscal Year End (MM/DD) | | | | | | | | | |
| G. If publicly traded, insert stock symbol: | | | | | | | | | |
| H. Physical Address (Do not use P.O. Box) | | | | | | | | | |
| Number & Street | | City | | State | | Country | | Postal Code | |
| I. Mailing Address Same as above | | | | | | | | | |
| P.O. Box or Number & Street | | City | | State | | Country | | Postal Code | |
| J. Website Provide the full web address(es) for the company and any separate websites for other trade names used. | | | | | | | | | |
| 1. Web Address: | | | | | | | | | |
| Is your company transacting business through this website? | | | | | | | | | |
| 2. Web Address: | | | | | | | | | |
| Is your company transacting business through this website? | | | | | | | | | |
| 3. Mobile Device Application: | | | | | | | | | |
| Is your company transacting business through this application? | | | | | | | | | |
| K. Business Communications | | | | | | | | | |
| Business Phone | | Ext. | | Fax Number | | Ext. | | Toll Free | |
| Primary Email | | | | | | | | | |
| L. Other than the office in H., does the entity conduct business with consumers through branch offices or other business locations? | | | | | | | | | |
| All other locations and or branch offices the entity may use to conduct business with Alaskans must be reported as a "Delegate or Branch Location," even if said location is not located in Alaska. Please add additional branches on a separate page. | | | | | | | | | |
| Branch: | | | | | | | | | |
| Street Address: | | | | | | | | | |
| City: | | State: | | | | Postal Code: | | | |
| Business Phone #: | | | | | | Fax #: | | | |
| Branch Manager: | | | | | | Email: | | | |
| Branch: | | | | | | | | | |
| Street Address: | | | | | | | | | |
| City: | | State: | | | | Postal Code: | | | |
| Business Phone #: | | | | | | Fax #: | | | |
| Branch Manager: | | | | | | Email: | | | |
| Branch: | | | | | | | | | |
| Street Address: | | | | | | | | | |
| City: | | State: | | | | Postal Code: | | | |
| Business Phone #: | | | | | | Fax #: | | | |
| Branch Manager: | | | | | | Email: | | | |

Alaska Company Uniform Renewal Application Form

| 1. Admin. Information Cont. | | | | | |
|--|-----------|-----------------------------------|-------|-------------------------------|-------------|
| M. Other Trade Names | | | | | |
| List any other trade name(s) (i.e. business name, fictitious name, or "doing business as" name) for this company below. | | | | | |
| | | | | Identify applicable industry: | |
| Other Trade Names or "dba" used | | State(s) where "dba" Name is used | | | |
| | | | | Identify applicable industry: | |
| Other Trade Names or "dba" used | | State(s) where "dba" Name is used | | | |
| 2. Personnel Contact Information | | | | | |
| A. Resident/Registered Agent (If resident/registered agent is a company, put the words 'registered agent' in the Title field.) | | | | | |
| | | | | | |
| First Name | Last Name | Company | | Title | |
| | | | | | |
| Number & Street (No P.O. Boxes) | | City | State | Country | Postal Code |
| | | | | | |
| Business Phone | Ext. | Fax Number | Ext. | Email Address | |
| List below the individual as the primary contact employee for this company. Minimum of one primary company contact and one primary consumer complaint (regulator) contact must be identified and the individual must be authorized to receive all compliance and licensing information, communications and mailings, and be responsible for disseminating it to others within your company as necessary. Use additional sheets if necessary. | | | | | |
| B. Primary Application Contact | | | | | |
| | | | | | |
| First Name | Last Name | | | Title | |
| | | | | | |
| Number & Street (No P.O. Boxes) | | City | State | Country | Postal Code |
| | | | | | |
| Business Phone | Ext. | Fax Number | Ext. | Email Address | |
| C. Primary Compliance Contact | | | | | |
| | | | | | |
| First Name | Last Name | | | Title | |
| | | | | | |
| Number & Street (No P.O. Boxes) | | City | State | Country | Postal Code |
| | | | | | |
| Business Phone | Ext. | Fax Number | Ext. | Email Address | |
| D. Secondary Application Contact | | | | | |
| | | | | | |
| First Name | Last Name | | | Title | |
| | | | | | |
| Number & Street (No P.O. Boxes) | | City | State | Country | Postal Code |
| | | | | | |
| Business Phone | Ext. | Fax Number | Ext. | Email Address | |
| Indicate area in charge: | | | | | |
| | | | | | |
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Alaska Company Uniform Renewal Application Form

2. Personnel Contact Information Cont.

Provide the information requested below for the records custodian maintaining records for the company. Provide the name of the individual who should be contacted with inquiries or to gain access to the storage location. If multiple custodians maintain records for the company, use the Comments field to indicate the types of records this custodian maintains. Use additional sheets if necessary.

E. Books & Records Contact

| | | | | | |
|---------------------------------|------|------------|-------|---------------|-------------|
| | | | | | |
| First Name | | Last Name | | Title | |
| | | | | | |
| Number & Street (No P.O. Boxes) | | City | State | Country | Postal Code |
| | | | | | |
| Business Phone | Ext. | Fax Number | Ext. | Email Address | |
| Comments: | | | | | |

3. Executive Officers, Indirect Owners, & Foreign Agents

Provide the information requested below for the individual or company being identified as a (i) direct owner of 25% or more; (ii) executive officer; and/or (iii) control person of your company (excluding indirect owners that must be identified in the Indirect Owners section of this filing). An MU2 Form (attached left) must be completed for all natural person(s) identified in this section.

A. Executive Officers & Direct Owners

| Full Legal Name (Individuals: Last Name, First Name, MI) | Ownership Type | Equity Owner | % of Ownership | Stock Symbol (Company only) | SSN or EIN | Individual or Company |
|--|----------------|--------------|----------------|-----------------------------|------------|-----------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

B. Indirect Owners

| Full Legal Name (Individuals: Last Name, First Name, MI) | Direct Owner Of | Equity Owner | % of Ownership | Stock Symbol (Company only) | SSN or EIN | Individual or Company |
|--|-----------------|--------------|----------------|-----------------------------|------------|-----------------------|
| | | | | | | |
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4. Additional Information

A. Affiliates/Subsidiaries

Affiliate/Subsidiary Name:

| | | | | |
|---------------------------------|----------------------------------|-------|------------------------------|-------------|
| Number & Street (No P.O. Boxes) | City | State | Country | Postal Code |
| Control Relationship: | Affiliate (Under Common Control) | | Subsidiary (Entity Controls) | |

Description:

I am providing an organizational chart or a document briefly describing control relationship(s) with affiliates/subsidiaries and control entities (including percentage of interest) Yes No

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4. Additional Information

Select **all** business activities conducted by your company from the list below, including business activities for which a license request is being submitted or for which your company is not specifically seeking licensing authority.

| B. Money Services | C. Consumer Finance | D. Debt |
|--|--|---|
| Electronic Money Transmission Issuing Traveler's Checks Selling Traveler's Checks Issuing Money Orders Selling Money Orders Bill Paying Issuing and/or Selling Drafts Transporting Currency Issuing Prepaid Access/Stored Value Open Closed Internet Check Cashing Foreign Currency Dealing or Exchanging Door to Door Transactions Internet Internet Only Seasonal Business Dates of operation: _____ Other: _____ | Payday Lending – Storefront Payday Lending – Online Consumer Loan Brokering Consumer Loan Lending Consumer Loan Servicing Sales Finance Company – Motor Vehicles Sales Finance Company – General Title Lending Refund Anticipation Lending Premium Finance Company Retail Installment Selling Escrowing Agents 1031 Exchange Companies Private Student Loan Lending Non-Private Student Loan Lending Rent-To-Own Accounting/Billing Servicing Industrial Loan Lending Companies Pawn Brokering | First Party Debt Collection Third Party Debt Collection Debt Negotiation Debt Settlement/Debt Adjuster Passive Debt Buying (Does Not Undertake Direct Collections On Accounts) Debt Management/Credit Counseling Credit Repair Judgment Recovery Repossession Agency Activities Non-Mortgage Loan Modifications Bi-Weekly Payment Processing Services Other - Debt |

E. Other Business

Will entity engage in any non-financial services-related business?

If "yes" briefly describe.

Alaska Company Uniform Renewal Application Form

5. Disclosure Questions

For purposes of responding to the questions below, the term "control affiliate" means: a partnership, corporation, trust, LLC, or other organization that directly or indirectly controls, or is controlled by, the licensee. If the answer to any of the following is "YES", you must provide complete details on a separate sheet.

Financial Disclosure

- A. In the past ten years has the entity or a control affiliate been the subject of a bankruptcy petition?
- B. Has a bonding company ever denied, paid out on, or revoked a bond for the entity?
- C. Does the entity have any unsatisfied judgments or liens against it?

Criminal Disclosure

- D. Has the entity or a control affiliate ever:
1. Been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?
 2. Been charged with any felony?
 3. In the past 10 years, been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a misdemeanor involving: (i) financial services or a financial services-related business, (ii) fraud, (iii) false statements or omissions, (iv) theft or wrongful taking of property, (v) bribery, (vi) perjury, (vii) forgery, (viii) counterfeiting, or (ix) extortion?
 4. Are there pending charges for a misdemeanor specified in 5(D)(3)?

Regulatory Action Disclosure

- E. In the past 10 years, has any state or federal regulatory agency or foreign financial regulatory authority ever:
1. Found the entity or a control affiliate to have made a false statement or omission or been dishonest, unfair or unethical?
 2. Found the entity or a control affiliate to have been involved in a violation of a financial services-related regulation(s) or statute(s)?
 3. Found the entity or a control affiliate to have been a cause of a financial services-related business having its authorization to do business denied, suspended, revoked or restricted?
 4. Entered an order against the entity or a control affiliate in connection with a financial services-related activity?

- F. Has the entity's or a control affiliate's authorization to act as an attorney, accountant, or State or federal contractor ever been revoked or suspended?
- G. Is there a pending regulatory action against the entity or a control affiliate for any alleged violation described in E. & F.?

Civil Judicial Disclosure

- H. Has any domestic or foreign court:
1. In the past ten years enjoined the entity or a control affiliate in connection with any financial services-related activity?
 2. In the past ten years found the entity or a control affiliate was involved in a violation of any financial services-related statute(s) or regulation(s)?
 3. in the past ten years dismissed, pursuant to a settlement agreement, a financial services-related civil action brought against the entity or a control affiliate by a state, federal, or foreign financial regulatory authority?
- I. Is there a pending financial services-related civil action in which the entity or a control affiliate is named for any alleged violation described in H.?

Customer Arbitration/Civil Litigation Disclosure

- J. Have you ever been named as a respondent/defendant in a financial services-related 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?

Alaska Company Uniform Renewal Application Form

NEW APPLICATION ATTESTATION

EXECUTION:

I, _____ (Full Name), _____ (Title/Position), am employed by or am an officer or a control person of _____ (Applicant). Applicant 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 of this application, are current, true, and complete and are made under the penalty of perjury, or un-sworn falsification to authorities, or similar provisions as provided by law;
2. To the extent any information previously submitted is not amended, such information remains accurate and complete;
3. That the State of Alaska, to which the application is being submitted, may conduct any investigation into the background of the Applicant and any related individuals or entities, in accordance with all laws and regulations for purposes of making a determination on the application;
4. To keep the information contained in this form current and to file accurate supplementary information on a timely basis; and
5. To comply with the provisions of law, including the maintenance of accurate books and records, pertaining to the conduct of business for which the Applicant is applying.

If the Applicant has knowingly made a false statement of a material fact in this application or in any documentation provided to support the foregoing application, the foregoing application may be denied.

On this _____ (MM/DD/YYYY), I verify that I am the named person above and that I am authorized to attest to and submit this filing on behalf of the Applicant. I solemnly swear (or affirm) under the penalty of perjury or un-sworn falsification to authorities, or similar provisions as provided by law that I have reviewed the foregoing responses, have made diligent inquiry as to their accuracy, and they are true and correct to the best of my knowledge, information, and belief.

(Signature of Attestant)

(Printed name of Attestant)

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20_____.

NOTARY SEAL

(Signature of notary public)

County of: _____

Notary public state of: _____

My commission expires: _____

Alaska Statute 06.01.025 Records of the Department

Information in the records of the department obtained through the administration of this title is confidential, is not subject to subpoena, and may be revealed only with the consent of the department.

| <h1>MU2</h1> | <h2>Biographical Statement & Consent Form</h2> | | | | Date of Filing | |
|--|--|--------------------------|------------|--|-------------------|--------------|
| 1. Individual's Identifying Information: | | | | | | |
| | | | | | | |
| First Name | | Middle Name | | Last Name | | Suffix |
| Social Security Number: | | | | Gender: | | |
| Date of Birth: | | State/Province of Birth: | | | Country of Birth: | |
| List all names, other than your legal name, you have used or are using, or which you are or were know since 18 years of age. This should include nicknames, aliases, & names used before or after marriage. (Use additional sheets as needed.) | | | | | | |
| | | | | | | |
| Name | | Name | | Name | | Name |
| Employer Name: | | | | | | |
| Office of Employment Address | | | | Check box if this is your private residence. | | |
| | | | | | | |
| Number & Street (No P.O. Boxes) | | City | | State | Country | Postal Code |
| Current Residential Address (if different from Employment Address) | | | | | | |
| | | | | | | |
| P.O. Box or Number & Street | | City | | State | Country | Postal Code |
| | | | | | | |
| Business Phone | | Ext. | Fax Number | | Ext. | Mobile Phone |
| Primary Email | | | | | | |
| 2. Residential History: Starting with current address, give all addresses for the past 10 years. (Attach additional pages as needed.) | | | | | | |
| From MM/YY | To MM/YY | Address | City | State / Province | Postal Code | Country |
| | | | | | | |
| | | | | | | |
| | | | | | | |
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3. Employment History: Provide complete employment history for the past 10 years. Account for all time including full & part time employments, self-employment, military service, and homemaking. Also include periods such as unemployment, full-time student, extended travel, etc. Indicate "Yes" or "No" for employment in financial service-related businesses. (Attach additional pages as needed.)

| From MM/YY | To MM/YY | Employer | Position | State / Province | Postal Code | Country | Yes or No |
|---------------|-------------|----------|----------|---------------------|----------------|---------|--------------|
| | | | | | | | |
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4. Other Business: Are you currently engaged in any other business, either as a proprietor, partner, officer, Yes No
director, employee, trustee, agent, or otherwise?

(Please exclude non-financial services-related activity that is exclusively charitable, civic, religious, or fraternal, and is recognized as tax exempt.) If "Yes", provide the following details: the nature of said business; your position, title, or relationship with said business; the start date of said relationship; approximate number of hours per month devoted to said business; briefly describe your duties relating to said business. (Attach additional pages as needed.)

| | |
|--|--|
| 5. Disclosures Please provide complete details for all "Yes" answers. (Attach additional pages of all events and/or proceedings.) | |
| Financial Disclosure | |
| Within the past ten years: | |
| Have you filed a personal bankruptcy petition or been subject of an involuntary bankruptcy petition? | |
| Based upon events that occurred while you exercised control over an organization, has said organization filed a bankruptcy petition or been subject of an involuntary bankruptcy petition? | |
| Have you been the subject of a foreclosure action? | |
| Has a bonding company ever denied, paid out on, or revoked a bond for you? | |
| Based upon activities that occurred while you exercised control over an organization, has any bonding company ever denied, paid out on, or revoked a bond for said organization? | |
| Do you have any unsatisfied judgements or liens against you? | |
| Are you delinquent on any court orders child support payments? | |
| Criminal Disclosure | |
| Have you ever been convicted of, or pled guilty, or nolo contendere (no contest) in a domestic, foreign, or military court to any felony? | |
| Are there pending charges against you for any felony? | |
| Based upon activities that occurred while you exercised control over an organization, has said organization ever: | |
| Been convicted of, or pled guilty, or nolo contendere (no contest) in a domestic, foreign, or military court to any felony? | |
| Been charged with any felony? | |
| Have you ever been convicted of, or pled guilty, or nolo contendere (no contest) in a domestic, foreign, or military court to a misdemeanor involving financial services-related businesses; fraud, false statements, or omissions; theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or conspiracy to commit any of these offenses? | |
| Are there pending charges against you for a misdemeanor as described above? | |
| Based upon activities occurring while you exercised control over an organization, has said organization ever: | |
| Been convicted of, or pled guilty, or nolo contendere (no contest) in a domestic, foreign, or military court to a misdemeanor as described above? | |
| Been charged with a misdemeanor as described above? | |
| Civil Judicial Disclosure | |
| Has any domestic or foreign court ever: | |
| Enjoined you in connection with any financial services-related activity? | |
| Found that you were involved in a violation of any financial services-related statute(s) or regulation(s)? | |
| Dismissed, pursuant to a settlement agreement, a financial services-related civil action brought against you by a State, Federal, or foreign financial regulatory authority? | |
| Are you named in any pending financial services-related civil action that could result in a "Yes" to the other Civil Judicial questions? | |

| | |
|--|--|
| 5. Disclosures - Continued | |
| Regulatory Action Disclosure | |
| Has any State, Federal, or foreign financial regulatory authority ever: | |
| Found you to have made a false statement or omission or been dishonest, unfair, or unethical? | |
| Found you to have been involved in a violation of a financial services-related statute(s) or regulation(s)? | |
| Found you to have been a cause of a financial services-related business having its authorization to do business denied, suspended, revoked, or restricted? | |
| Entered an order against you in connection with a financial services-related activity? | |
| Denied, suspended, or revoked your registration or license, disciplined you, or otherwise by order, prevent you from associating with a financial services-related business or restricted your activities? | |
| Barred you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in financial services-related business? | |
| Issued a final order based on violations of any law or regulation that prohibits fraudulent, manipulative, or deceptive conduct? | |
| Have you ever had an authorization to act as an attorney, accountant, or State or Federal contractor that was revoked or suspended? | |
| Are you now the subject of any regulatory proceeding that could result in a "Yes" to the other Regulatory Action questions? | |
| Customer Arbitration / Civil Litigation Disclosure | |
| Have you ever been named as a respondent/defendant in a financial services-related consumer-initiated arbitration or civil litigation which: | |
| Is still pending; or | |
| Resulted in an arbitration award or civil judgement against you, regardless of amount, or that required corrective action; or | |
| Was settled for any amount? | |
| Termination Disclosure | |
| Have you ever voluntarily resigned, been discharged, or permitted to resign after allegations were made that accused you of: | |
| Violating statutes, regulations, rules, or industry standards of conduct? | |
| Fraud, dishonesty, theft, or the wrongful taking of property? | |

On this _____(MM/DD/YYYY), I verify that I am the named person above and that I am authorized to attest to and submit this filing on my own behalf. I solemnly swear (or affirm) under the penalty of perjury or un-sworn falsification to authorities, or similar provisions as provided by law that I have reviewed the foregoing responses, have made diligent inquiry as to their accuracy, and they are true and correct to the best of my knowledge, information, and belief.

(Signature of Applicant)

(Printed name of Applicant)

Alaska Small Loan Act Bond Form

Bond # _____

KNOW ALL PERSONS BY THESE PRESENTS, that _____,
duly authorized to do business in the State of Alaska and having its principal place of business in the City of _____, State of _____, as Principal, and _____, and having its principal place of business in the City of _____, State of _____, who is duly authorized to engage in business in Alaska as Surety, are both held and firmly bound unto the STATE OF ALASKA in the full penal sum of _____ DOLLARS (\$_____) lawful money of the United State, for payment of which, well and truly to be made, we hereby bind ourselves, our heirs, administrators, executors, successors and assigns, jointly and severally, firmly by these presents.

This obligation secures the faithful performance of the obligations of the principal as the small loan company licensee, including its officers, individuals, employees, and authorized delegates with respect to the Small Loan Act, AS 06.20 and 3 AAC 12.

If the principal fully conforms to and abides by the provisions of the said Act and of all rules and regulations lawfully made by the licensing official thereunder and will pay to the State of Alaska and to any person or persons who may have a cause of action against the obligor of said bond under the provision of said Act any and all moneys that may become due or owing to the State or to such person or persons from said obligor under and by virtue of the provisions of this Act, then this obligation shall be null and void, otherwise to remain in full force and effect.

This bond may be cancelled by the surety on 30 days of written notice to the Director, Division of Banking and Securities, PO Box 110807, Juneau, AK 99811-0807. Provided, however, such notice shall not affect any liability arising prior to the effective date of cancellation of this bond and the PRINCIPAL and SUREY shall be and remain liable for a period of five (5) years from the date of cancellation.

PROVIDED, that the total liability hereunder for all causes of action arising during the period for which this bond is written shall not exceed the principal sum of this bond.

Alaska Small Loan Act Bond Form

IN WITNESS WHEREOF, the said principal has hereunto set her/his hand and seal, and the said Surety has caused these presents to be signed and its corporate seal to be hereunto affixed the day and year first above written.

Signed, sealed, and dated this _____ day of _____, 20_____.

SEAL

By: Principal: _____

Signature: _____

Title: _____

SEAL

By: Surety: _____

Signature: _____

Attorney-In-Fact: _____