

Sample Branch Application Through Department of Banks

This is not a guarantee that you will receive a license from the Department of Banks but simply a guideline to complete the application for submission.

Application for Additional Office (Branch): Fee of \$250.00 per Office

- 1) As the company is licensed with Department of Banks
- 2) As issued by Department of Banks
- 3) The address of the home office as licensed with Department of Banks
- 4) The phone number of the home office as licensed with Department of Banks
- 5) The fax number of the home office as licensed with Department of Banks
- 6) Contact Person – Main contact person of the company and title
- 7) Address, phone and fax number of the Branch being applied for – Complete address
- 8) Manager of the Branch
- 9) Anticipated opening date of the branch office.
- 10) Hours of operation of the branch
- 11) Number of employees - do not include branch manager but do include all loan officers and support staff
- 12) If you answer “NO” to any of the questions on this page you will not be granted an Additional Office (branch) as you are now required to apply for a new entity.
- 13) Read, sign and date where indicated
- 14) Verification – Must be signed by the owner, partners and or all corporate officers that ownership

Application:

- 1) Company name as incorporated.
- 2) License number – If you are applying for a mortgage bankers license and if

**NOTICE TO APPLICANTS FOR BRANCH OFFICE
LICENSURE UNDER THE RESIDENTIAL MORTGAGE
LICENSE ACT OF 1987**

FOR FULL-SERVICE OFFICE(S) IN ILLINOIS, YOU NEED TO SUBMIT THE FOLLOWING TO THE OFFICE OF BANKS AND REAL ESTATE:

- NOTICE OF INTENT TO ESTABLISH A FULL-SERVICE OFFICE;
- EMPLOYMENT AGREEMENT (PLEASE BE SURE TO INCLUDE ITEMS 2(a) THROUGH 2(d), AS SHOWN ON PAGE 2 OF THE NOTICE OF INTENT TO ESTABLISH A FULL-SERVICE OFFICE, IN THE EMPLOYMENT AGREEMENT.)
- COPY OF THE ILLINOIS FULL-SERVICE OFFICE LEASE EXECUTED BY ALL PARTIES.

PLEASE DO NOT RETURN THIS PAGE TO OUR OFFICE!



NOTICE OF INTENT TO ESTABLISH ADDITIONAL FULL-SERVICE OFFICE

IMPORTANT NOTICE

This State agency is requesting disclosure of information that is necessary to determine compliance with the Residential Mortgage License Act of 1987 and the Commissioner's Rules promulgated thereto (205 ILCS 635/4-1, 4-4). Reporting of this information is MANDATORY (205 ILCS 635/4-4). Failure to provide the information could result in a fine, the revocation or suspension of your license, or the issuance of a reprimand (205 ILCS 636/4-5). In addition, failure to report the requested information may adversely affect any attempt you may make to renew your license (205 ILCS 635-2-6). A Licensee who deliberately, willfully or knowingly makes, subscribes or causes to be made any false entry in this Notice with intent to deceive shall be guilty of a class 4 felony (205 ILCS 635/4-4). This form has been approved by the State Forms Management Center.

NOTICE REQUIREMENT

Each Licensee, that intends to operate and maintain an Additional Full-Service Office shall file this Notice of Intent to Establish an Additional Full-Service Office with the following exceptions.

- 1) *Branch offices located outside of Illinois* are not required to be licensed by this Office.
- 2) *Out-of-state licensees opening their first full-service office in Illinois within the State of Illinois* must complete and submit this application, but are not required to pay the filing fee.

The filing must be filed with this Office **thirty days prior** to the proposed opening of such office (Section 1050.350 of Title 38, Chapter II of the Illinois Administrative Code).

APPLICANT INFORMATION (Please print or type.)

Licensee Name ①

License Number ②

Home Office Address
City, State, Zip ③

Phone ④ Fax ⑤

Contact Person/Title ⑥

Additional Full Service Office Address
City ⑦ , State IL Zip ⑦

Manager/Operator ⑧

Phone ⑨ Fax ⑦

Anticipated Opening Date ⑨ Hours of Operation ⑩ Number of Employees ⑪

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FILING INSTRUCTIONS

The "exclusive employee" exemption at Section 1-4(d)(3) of the Act does not allow a Licensee to permit separate entities that require separate licenses to manage and operate their Additional Full-Service Office in violation of the law. Accordingly, the following questions have been developed to identify instances of such violation. You must answer all questions.

If your answer to any of the following questions is "no," you are not opening an Additional Full-Service Office. The office is a new entity that requires a separate license in order to operate.

Prior to issuance of a certificate for the Additional Full-Service Office, your written employment agreement will be reviewed to ensure you are, in fact, opening an Additional Full-Service Office and not a separate entity that requires a separate license.

Licensee Name _____

License Number _____

Yes No

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. All persons who will work at the Additional Full-Service office to assist the Licensee in the performance of activities regulated by the Act ("employees") are employed by the Licensee pursuant to written employment agreements. |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Each of the Licensee's written employment agreements state: a. The employee may assist only the Licensee in the Licensee's performance of activities regulated by the Act and Rules; AND b. The employee may not assist any other Licensee, exempt entity or entity that should be licensed in the performance of any activity regulated by the Act; AND c. The employee may be compensated for the performance of activities regulated by the Act by the Licensee only; AND d. Liability for all acts and omissions of the employee arising out of the performance of licensable activities is fully and explicitly imputed to and assumed by the Licensee. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. A copy of one (1) signed written employment agreement is attached. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. The Additional Full-Service Office has and uses, in all instances, the same name as the Licensee. |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. The Additional Full-Service Office is, in all respects, the same individual corporation, sole proprietorship, partnership, limited liability company, association or other entity as the Licensee. The Additional Full-Service Office is not a subsidiary, parent or affiliate of and is not any other entity or person that is legally separate from the Licensee. |

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FORM AUTHORITY

This form is authorized by the Residential Mortgage License Act of 1987 (205 ILCS 635/4-1) and the Commissioner's Rules promulgated pursuant thereto (Section 1050.350, Title 38, Chapter II of the Illinois Administrative Code). Terms contained in this form shall be construed as defined in the Act and Rules.

FEE REQUIREMENT

Each Notice of Intent to Establish an Additional Full-Service Office shall be accompanied by an Additional Full-Service Office Fee of \$250.00. Certified checks or money orders must be made payable to the Office of Banks and Real Estate and mailed to 500 East Monroe, Suite 800, Springfield, IL 62701. (Sections 10050.350 and 1050.250 of the Rules). Please note the filing exceptions outlined in the Notice Requirement section of this form.

CERTIFICATE REQUIREMENT

The Commissioner shall issue a certificate for an Additional Full-Service Office upon receipt of this Notice and the required fee provided that review of your written employment agreement indicate you are, in fact, opening an Additional Full-Service Office and not a separate entity that requires a separate license. The certificate shall be posted conspicuously in the Additional Full-Service Office [205 ILCS 635/2-8, 1-3(f)].

MAILING INSTRUCTIONS

This notice, together with the Additional Full-Service Fee, must be filed with the Office of Banks and Real Estate, Bureau of Residential Finance, 500 East Monroe Street, Springfield, IL 62701. (Please note that the filing fee is processed in Springfield and the Notice is forwarded to the Mortgage Banking Division in Chicago for processing.)

ACCESS TO CREDIT

I hereby authorize the Office of Banks and Real Estate to conduct a financial and business responsibility background check, as may be required.

The branch manger(s) should sign. Please print name below signature line.

X _____ Date: _____

X _____ Date: _____

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VERIFICATION

Under penalties as provided by law, the undersigned certifies that the information set forth in this Notice is true and correct. The undersigned further certifies that all other information provided by the Licensee to the Office of Banks and Real Estate remains true and correct.

In addition to the Act and Rules generally, the Licensee agrees to comply with specific Additional Full-Service Office and Full-Service Office requirements set forth at Sections 1-4(r), 2-8, 2-9 and 3-4 of the Act and Sections 1050.260, 1050.340 and 1050.350 of the Rules.

This verification must be signed by the owner, if the Licensee is a sole proprietorship; by all partners if the Licensee is a partnership; by two officers or all directors, if the Licensee is a corporation; by all members, if the Licensee is an association; or by all managers and all members retaining any authority or responsibility under the operating agreement if the Licensee is a limited liability company.

Licensee Name _____

License Number _____

By: _____ Date: _____

By: _____ Date: _____

By: _____ Date: _____

By: _____ Date: _____

By: _____ Date: _____

STATE OF _____) Subscribed and sworn to before me this

COUNTY OF _____) day of _____, 20__

Notary Signature _____ (SEAL)