



Glen A. Perlow  
Bank Commissioner

# State of New Hampshire

## Banking Department

53 Regional Drive  
Concord, NH 03301

Telephone: (603) 271-3561  
Fax: (603) 271-0750  
Licensing: (603) 271-8675  
www.nh.gov/banking

NMLS **Company** Unique ID Number: \_\_\_\_\_

**Applicant Legal Name:** \_\_\_\_\_

### Part 2 of the NH Sales Finance application: Continued from Question No. 9 of the MU1)

10.	<b>Bonded Dealer License</b>		
A.	Has the <i>applicant</i> been issued a Bonded Dealer License by the New Hampshire Department of Safety?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
B.	If "Yes", please enter the license number of the Bonded Dealer License: _____.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
C.	The name that appears on the Bonded Dealer License is _____.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
11.	Will <i>applicant</i> engage in any non-sales finance-related business? If "yes" briefly describe. _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>
12.	Will <i>applicant</i> occupy or share space with any <i>person(s)</i> engaged in <i>financial services-related</i> activity? If "yes," provide the name(s) of the other <i>person(s)</i> . _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>

#### 13 Operations

- |   |                          |                          |
|---|--------------------------|--------------------------|
| A. Are loan funded by the <i>Applicant's</i> own funds?   | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Are loans funded by a warehouse line of credit?  | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Are loans funded in another manner? Describe:<br>_____   | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Will the <i>applicant</i> both sell and finance motor vehicles ("Buy here, Pay here")?   | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Will the <i>applicant</i> do "Spot Delivery"? (Deliver the vehicle before financing is approved).<br><br>Under NH law, a retail installment contract must be complete as to all its terms before it is signed by a borrower. If the applicant will spot deliver vehicles, will the borrower's downpayment be refunded and the borrower's trade-in be returned if a change in terms requires the execution of a new contract? | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Will the <i>applicant</i> sell and/or finance any in-house warranty or extended service contract? If "yes", attach copies of the approval(s) of such contracts issued by the NH Insurance Department.  | <input type="checkbox"/> | <input type="checkbox"/> |
| G. Will the <i>applicant</i> sell and/or finance third party product warranties, vehicle warranties or third party extended service contracts? If "yes", provide a list of all such products sold or funded. Attach a separate sheet if necessary.  | <input type="checkbox"/> | <input type="checkbox"/> |

Name/Title of Product	Name of Issuing Company	Address	Zip
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14. Provide a list of companies in whose names loans or leases are or will be closed. Attach a separate sheet if necessary.

Company Name	Address/Zip	Telephone No.	Contact Person
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15. If loans and leases are or will be serviced by 3<sup>rd</sup> parties, provide a list of such servicers. Attach a separate sheet if necessary.

Company Name	Address/Zip	Telephone No.	Contact Person
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16. Provide a list of all NH motor vehicle dealers who 1) will forward loan and lease credit applications to the *applicant* for underwriting and/or approval, and/or 2) from whom the *applicant* will purchase closed motor vehicle loans, and/or 3) from whom the *applicant* will accept assignments. Attach a separate sheet if necessary.

Company Name	Address/Zip	Telephone No.	Contact Person
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**THE INDIVIDUAL WHO SIGNED THE EXECUTION SECTION ON PAGE 1 OF THE MU1 FORM MUST ALSO MAKE THE AFFIRMATION BELOW AND SIGN THE APPLICATION UNDER PENALTY OF UNSWORN FALSIFICATION, RSA 641:3.**

I subscribe and affirm, under penalty of perjury, that the statements made in this application, including statements made in any accompanying papers, schedules and attachments, have been examined by me and to the best of my knowledge and belief are true, correct and complete, and that I am duly authorized to execute this affirmation. I understand that any misrepresentation made to the banking department may result in denial or revocation of the sales finance license to which this form relates.

I agree, on behalf of the *Applicant*, that pursuant to NH RSA 361-A, the *Applicant* will promptly report and amend documents and records on file with the New Hampshire Banking Department for any material changes (including but not limited to change in owners, officers, directors, managers including NH branch managers, address, form of organization, contact information, FYE, etc.). The report of an amendment must be filed within 30 days of the event that requires the filing of an amendment.

I acknowledge on behalf of the *applicant* that the *applicant's* business, if licensed, will be operated in accordance with the New Hampshire Revised Statutes Annotated and rules of the New Hampshire Banking Department, and further acknowledge that the New Hampshire Banking Department is authorized to conduct examinations of the business affairs and records of the *applicant's* licensed business at any time with or without notice, and that all books, papers, files, related material, and records of assets, whether electronically stored or otherwise, shall be subject to the Department's examination. I am signing this document under penalty of Unsworn Falsification pursuant to NH RSA 641:3.

Date: \_\_\_\_\_

For \_\_\_\_\_  
(Print or type *Applicant* or *Licensee's* name)

By \_\_\_\_\_  
(Print or type name of the authorized signatory)

Signature \_\_\_\_\_  
(Signed under penalty of Unsworn Falsification  
pursuant to NH RSA 641:3)

Title \_\_\_\_\_