



IN THE MISSOURI DIVISION OF FINANCE

RESIDENTIAL MORTGAGE BROKERS LICENSE ACT

## APPLICATION FOR CHANGE OF NAME OR ADDRESS

### NOTICE REQUIREMENT

A Licensee shall file an Application for Change of Name or Address, with the fee, (10) business days in advance, on a form prescribed by the Commissioner. (Regulation 20 CSR 1140-30.030(6)(B))

### FEE REQUIREMENT

The Commissioner shall collect an Application for Change of Name or Address Fee of \$50.00. Checks shall be made payable to the Division of Finance. (Regulation 20 CSR 1140-30.030(30))

### MAILING INSTRUCTIONS

This Application, together with the Fee of \$50.00, must be filed with the Division of Finance, Harry S Truman State Office Building, Room 630, P.O. Box 716, Jefferson City, Missouri 65102-0716.

Name Change

Address Change

### CURRENT INFORMATION:

LICENSEE NAME \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

LICENSEE STREET ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

### PROPOSED CHANGE:

LICENSEE NAME \_\_\_\_\_

LICENSEE STREET ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_