APPLICATION FOR AN ADDITIONAL OFFICE OR THE RELOCATION OF AN EXISTING OFFICE PURSUANT TO § 6.2-2032 OF THE CODE OF VIRGINIA

Bureau of Financial Institutions 1300 East Main Street, Suite 800 Post Office Box 640 Richmond, Virginia 23218-0640

INSTRUCTIONS:

Attach a check for \$150 payable to the Treasurer of Virginia.

The application fee is not refundable.

Pursuant t	to § 6.2-2032 of the Cod	e of Virginia,
(N	ame and Address of Lic	ensee)
hereby applies to the State Corporation Co	ommission for authority	to operate a debt settlement services office at
	(Street Address)	
(City or Town)	(State)	(Zip Code)
If the proposed office will rep	lace an existing office, i	dentify the office being relocated:
	(Street Address)	
(City or Town)	(State)	(Zip Code)
Date office to be established/relocated:business, attach explanation. (Note: For outprovide the date <u>Virginia business</u> is to com		If proposed office is already conducting Virginia authorized to conduct business in other states
	CERTIFICATION	
The undersigned certifies that the facts contain file this application.	ned in this application an	re true and that he/she has been duly authorized to
Name (Type or Print)		Signature
Date		Title
Telephone Number/E-mail Address		

Information about appeals: All applications are investigated by the Bureau of Financial Institutions. Certain application decisions are made by the Commissioner of Financial Institutions under delegated authority from the State Corporation Commission. In the event you wish to appeal either a determination made by the Bureau of Financial Institutions in the course of its investigation of your application or the Commissioner of Financial Institutions' decision on your application, you may request a formal review by the State Corporation Commission in accordance with its Rules of Practice and Procedure (https://www.scc.virginia.gov/pages/Case-Information)