State of Connecticut
Department of Banking
Consumer Credit Division
260 Constitution Plaza, Hartford, CT 06103

REQUEST FOR CHANGE OF OFFICER FORM
Debt Negotiation

Form may be used to add or delete officers/directors, members or partners.

Instructions:

1. Please be advised that per Section 36a-658 of the Connecticut General Statutes licenses **shall not be transferable or assignable.**
2. Please provide full given name and residence (P.O. Box is not acceptable) of any control person (member, partner, trustee, officer, director, or individual with a similar status or function).
3. Please complete **Personal and Business History Statement** for every new control person.
4. Please complete **Schedule of Compensation** for every new control person.
5. If applicable, please complete **Request for Change of Stockholder Form.**
6. Any questions, please contact Nancy Wawruck at 860-240-8221 or via e-mail at nancy.wawruck@ct.gov.

Company Name:_____**License Number(s)**_____

DBA Name (if applicable)_____

Telephone #_____ **E-mail Address**_____

PRESENT OFFICER SET-UP

Full Given Name	Title	Residential Address	Date of Birth

PROPOSED OFFICER SET-UP

Full Given Name	Title	Residential Address	Date of Birth

NOTE - If the Applicant is a corporation or association, this instrument must be signed by the President, Vice President or Secretary of the Applicant. If the Applicant is a partnership or LLC, this instrument must be signed by a general partner or member who is duly authorized to execute on behalf of the partnership or LLC, contracts, deeds and other instruments under seal. **Form must be executed by a present officer.**

By: _____ _____

Signature **Print Name & Title**

STATE OF _____

COUNTY OF _____

On this_____**day of**_____**, 20**_____**,**

personally appeared_____

(Name and Title)

to me known, and known by me to be the signer of the foregoing instrument, who being first duly sworn upon oath, deposes and says he/she has read, and knows the contents thereof, and that the alleged facts herein contained are true to his/her knowledge.

_____ _____

(Notary Public) or (Commissioner of Superior Court) **(Commission Expiration Date)**

Revised 6/14

STATE OF CONNECTICUT

DEPARTMENT OF BANKING

CONSUMER CREDIT DIVISION

260 CONSTITUTION PLAZA, HARTFORD, CT 06103-1800

PERSONAL AND BUSINESS HISTORY STATEMENT

Company Name: _____

Identifying Information

Individual Name:

Date of Birth (MM/DD/YYYY):

State of Birth:

Country/Province of Birth:

US Citizen:

Social Security Number:

Business Phone:

Home or Cell Phone:

Personal Email Address:

Residential Address

Number & Street	City	State/Province	Country	Postal Code

Employment History - List 10 years of your employment history

From	To	Employer	Location	Position Held

What experience have you had in the type of business your company is applying for?

Other Business

Are you currently engaged in any other business as a proprietor, partner, officer, director, employee, trustee, agent, or otherwise? Yes ☐ No ☐

NOTE: If "Yes", briefly describe.

Disclosure Questions

(a) Have you ever filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition? Yes ☐ No ☐

(b) Have you ever been the subject of receivership proceedings? Yes ☐ No ☐

(c) Have you ever made an assignment for the benefit of creditors? Yes ☐ No ☐

(d) Have you ever been refused any license by the Department of Banking or any other governmental body? Yes ☐ No ☐

(e) After such license was granted, was same ever suspended or revoked? Yes ☐ No ☐

(f) Has application for any license ever been withdrawn? Yes ☐ No ☐

(g) Is there any litigation pending against you or any firm or company of which you are now a partner, officer, director or manager? Yes ☐ No ☐

(h) Were you ever a partner, officer, director or manager of any firm or company which has filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition or for which a receiver has been appointed either during the time or within one year after you were so connected therewith? Yes ☐ No ☐

(i) Have you ever been charged in any suit with any fraudulent or illegal acts in any transaction of any kind or character? Yes ☐ No ☐

(j) Have you ever been involved in any civil litigation of any character arising out of the consumer credit business? Yes ☐ No ☐

(k) Have you ever defaulted in the payment of money collected from others? Yes ☐ No ☐

(l) Have you ever been convicted of any crime (not including motor vehicle traffic misdemeanors)? Yes ☐ No ☐

NOTE: If the answer to any of the above questions is "YES", provide complete details of all events or proceedings in an attachment.

Signature of Applicant

_____ _____

(Signature) *(Name and Title - Print)*

STATE OF _____

COUNTY OF _____

On this _____ day of _____, 20 ____, personally appeared

_____

(Name and Title)

to me known, and known by me to be the signer of the foregoing instrument, who being first duly sworn upon oath, deposes and says he/she has read, and knows the contents thereof, and that the alleged facts herein contained are true to his/her knowledge.

_____ _____

(Notary Public) *(My Commission Expires)*

(Commissioner of the Superior Court)

SCHEDULE OF COMPENSATION

Company:

First Name	Last Name	Position	Annual Salary	All Other Benefits and Payments (individually itemized)