

STATE OF CALIFORNIA - DEPARTMENT OF BUSINESS OVERSIGHT  
**STATEMENT OF IDENTITY AND QUESTIONNAIRE**  
DBO - FS 512 SIQ (Rev. 11-13)



\_\_\_\_\_  
File Number, if any

\_\_\_\_\_  
Licensee (Company Name)

Insert Department of Business Oversight file number, if any, and the name of the licensee (company) to which this Statement of Identity and Questionnaire relates.

Legal Full Name \_\_\_\_\_  
First Name Middle Name Last Name  
(Do not use initials or nicknames)

Position to be filled in connection with the preparation of this questionnaire (e.g., Officer, Director, Manager, etc.).

\_\_\_\_\_  
Sex \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Birthdate \_\_\_\_\_ Birthplace \_\_\_\_\_

Social Security Number \_\_\_\_\_  
See Commissioner's Release 2-G regarding whether furnishing the social security number is mandatory or voluntary and for a description of the use made of that information.

California Driver's License Number  
(if none, so state) \_\_\_\_\_

Residence  
Phone Number \_\_\_\_\_

Business  
Phone Number \_\_\_\_\_

Email  
Address \_\_\_\_\_

Hours of Employment  
(e.g., 8:00 a.m. to 5:00 p.m.) \_\_\_\_\_

Insert Full Name  
of Individual: \_\_\_\_\_

Insert Licensee  
(Company Name): \_\_\_\_\_

1. Residence addresses for the last 10 years:

From	To	Street	City	State	Zip Code
	Present				

Attach separate schedule if space is not adequate.

2. Employment for the last 10 years:

From	To	Employer Name and Address	Occupation and Duties
	Present		

Attach separate schedule if space is not adequate.

Insert Full Name  
of Individual: \_\_\_\_\_

Insert Licensee  
(Company Name): \_\_\_\_\_

3. a. Have you ever been named in any order, judgment or decree of any court or any governmental agency or administrator, temporarily or permanently restraining or enjoining you from engaging in or continuing any conduct, practice or employment?

Yes  No

If the answer is "Yes", give details:

\_\_\_\_\_

Attach a copy of any order, judgment or decree.

- b. Are you currently, or have you been within the last ten years, under federal, state or local investigation for possible violation of any law, ordinance, or licensing or regulatory scheme?

Yes  No

If the answer is "Yes", give details:

\_\_\_\_\_

4. a. Are you currently licensed to engage in financial business in this state or any other state?

Yes  No

Financial business means securities broker-dealer or agent, investment adviser or investment adviser representative, financial planner, insurance agent, escrow agent, finance lender or broker, mortgage lender or servicer, real estate broker, payday lender, financial institution, bill payer or prorater, commodity sales person, certified public accountant, or any other business involving investment or financial transactions.

If the answer is "Yes", describe in the chart below the following for each license:

License Period	License Number	Type of License/Business	Name and Address of Licensing Entity
From: To:			
From: To:			

Attach separate schedule if space is not adequate.

- b. Have you ever been refused a license to engage in any business in this state or any other state, or has any such license ever been suspended, revoked, or surrendered subject to a settlement, or any other similar action?

Yes  No

If the answer is "Yes", give details:

Insert Full Name  
of Individual: \_\_\_\_\_

Insert Licensee  
(Company Name): \_\_\_\_\_

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Attach a copy of any settlement.

5. Have you ever been convicted of or pleaded nolo contendere to a misdemeanor or felony other than minor traffic citations that do not constitute a misdemeanor or felony offense?

"Convicted" includes a verdict of guilty by judge or jury, a plea of guilty or of nolo contendere or a forfeiture of bail. All convictions must be disclosed even if the plea or verdict was thereafter set aside and the charges against you dismissed or expunged or if you have been pardoned. Convictions occurring while you were a minor must be disclosed unless the record of conviction has been sealed under Section 1203.45 of the California Penal Code or Section 781 of the California Welfare and Institution Code.

Yes  No

If the answer is "Yes", give details:

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Attach a copy of any order, judgment or decree. If a conviction was entered under Section 23152(a) of the Vehicle Code, attach a written declaration stating whether drugs were involved.

6. Have you ever been a defendant in a civil court action other than divorce, condemnation or personal injury?

Yes  No

If the answer is "Yes", please complete the following:

Date of suit \_\_\_\_\_ Location of court \_\_\_\_\_

Nature of suit \_\_\_\_\_

Attach a copy of any order, judgment or decree.

7. Have you ever been a subject of a bankruptcy or a petition in bankruptcy?

Yes  No

If the answer is "Yes", give date, title of case, location of bankruptcy filing:

8. Have you ever been refused a bond, or have you ever had a bond revoked or canceled?

Yes  No

If the answer is "Yes", give details:

Insert Full Name  
of Individual: \_\_\_\_\_

Insert Licensee  
(Company Name): \_\_\_\_\_

9. Have you ever changed your name including a woman's maiden name, or ever been known by any name other than that herein listed?

Yes  No

If so, explain. Change in name through marriage or court order and exact date of each name change must be listed.

Prior Name

Date of Name Change

\_\_\_\_\_  
\_\_\_\_\_

10. Have you ever done business under a fictitious firm name either as an individual or in any form of business, e.g., partnership, limited liability company, corporation or other?

Yes  No

If the answer is "Yes", give details:

\_\_\_\_\_  
\_\_\_\_\_

The following questions must be answered by all persons submitting this questionnaire in connection with an ESCROW AGENT'S LICENSE.

11. In what capacity will you be employed? \_\_\_\_\_  
(e.g., Clerk, Escrow Officer, Manager, Officer, Director, etc.)

12. Do you expect to be a party to, or broker or salesman in connection with escrows conducted by the escrow company which is employing you?

Yes  No

If the answer is "Yes", give details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This statement will be considered confidential information and will be filed and maintained as part of the confidential records not subject to public inspection.**

VERIFICATION

I, the undersigned, state that I am the person named in the foregoing Statement of Identity and Questionnaire; that I have read and signed said Statement of Identity and Questionnaire and know the contents thereof, including all exhibits attached thereto, and that the statements made therein, including any exhibits attached thereto, are true, and that I have not omitted any information needed to make this document true.

This verification may be made either before a Notary Public or as a declaration under penalty of perjury. This form MUST be executed before a Notary Public if it is executed OUTSIDE the State of California.

I certify/declare under penalty of perjury that the foregoing is true and correct.

Executed at \_\_\_\_\_  
(City)

\_\_\_\_\_  
(County) (State)

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature of Individual)

State of \_\_\_\_\_)

County of \_\_\_\_\_)

Date \_\_\_\_\_, 20\_\_\_\_\_

at \_\_\_\_\_

\_\_\_\_\_  
(Signature of Individual)

Subscribed and sworn to before me

\_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public in and for said County and State