

STATE OF CALIFORNIA –DEPARTMENT OF BUSINESS OVERSIGHT
SHORT FORM APPLICATION FOR A LICENSE UNDER CDDTL
DBO – CDDTL 2021 (REV. 8/13)



(Department of Business Oversight Use only)

DEPARTMENT OF BUSINESS OVERSIGHT

Fee Paid \$ _____

File No. _____

Receipt No. _____

**“SHORT FORM APPLICATION”
FOR A LICENSE UNDER THE
CALIFORNIA DEFERRED DEPOSIT TRANSACTION LAW
(LICENSEE CURRENTLY HAVING ONE OR MORE LICENSED LOCATIONS)**

This application **must be accompanied** by a fee of \$300 which includes an application fee of \$200, and an investigation fee of \$100, both of which are **non-refundable**. (Financial Code Section 23006.) The application (together with the fees payable to the Department of Business Oversight) must be filed only in the Los Angeles office of the Department of Business Oversight, located at 320 West 4th Street, Suite 750, Los Angeles, CA 90013-2344.

1. Name of applicant: _____
Fictitious Business Name: _____

(If the applicant will be doing business under a fictitious business name that has not been previously provided to the Department, provide a copy of the Certificate of Filing and Proof of Publication, **both of which bear the County Clerk's filing stamp**. Refer to Section 17000 of the Business and Professions Code for the requirements of filing this statement (Financial Code Section 23023)).

2. Applicant's licensed place of business will be located at (Financial Code Section 23020):

(Number and Street) (City) (State) (Zip)

(Telephone number) (Fax number)

Provide the following additional information for any mobile unit location:

(Manufacturer)	(Model)	(Year)	(Color)	(Vehicle Identification No. (VIN))
(License Plate No.)		(Applicant Identifier (if any))		

Proposed area in which the mobile unit will operate: _____

3. The **FULL** first, middle (if no middle name, so indicate) and last name of the individual in charge of this location.

*

(Last Name)	(First Name)	(Middle Name)
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(*Furnish a Statement of Identity and Questionnaire, form attached (Financial Code Section 23008), along with a fingerprint card obtained from the Department of Business Oversight and the cost of fingerprint processing (Financial Code Section 23006). If a Statement of Identity and Questionnaire has already been provided to the Department of Business Oversight for this individual, there is not need to provide another form. (Financial Code Section 23008.) Check cashers that held a valid permit prior to January 1, 2003 issued pursuant to Civil Code Section 1789.37, that have been making deferred deposits prior to January 1, 2003 and that fingerprint information on file with the California Department of Justice, must provide a Statement of Identity and Questionnaire but do not need to provide new fingerprint cards for persons who already have their cards on file with the Department of Justice. (Financial Code Section 23100.))

4. Please indicate by marking the appropriate box if there has been or will be **ANY CHANGE** in the applicant's plan of business previously submitted to the Department of Business Oversight.

Yes (please explain) _____

No

5. Please provide license number and address of one other California Deferred Deposit Transaction license held by this applicant.

File # _____ Address _____

6. Please provide the name, address, title, telephone number, and e-mail address (if applicable) of the person to contact regarding this application. The license will also be mailed to this person **unless otherwise instructed**.

Attention: _____
(Name) (Title) (Telephone Number)

(Number and Street) (City) (State) (Zip Code)

Email Address: _____

In the event of the issuance of a license, applicant agrees to comply with the requirements of the California Deferred Deposit Transaction Law and rules adopted, and orders issued, by the Commissioner of Business Oversight, and further agrees that in the event of any change of its officers, directors, or any persons named in this application, that an amendment to the application reflecting such change shall within sixty days from the date of the change, be filed with the Commissioner of Business Oversight setting forth the change, the effective date of the change, the names of the persons involved in the change, and a statement of the qualifications of each successor person. (Financial Code Sections 23008, 23010.) Applicant acknowledges that the Short Form Application supplements the information provided in the original application for a license under the California Deferred Deposit Transaction Law. (Financial Code Section 23005(b) & (c).)

WHEREFORE, applicant requests that a license be issued by the Commissioner of Business Oversight authorizing applicant to engage in business under the California Deferred Deposit Transaction Law within the State of California.

The applicant has duly caused this application to be signed on its behalf by the undersigned, thereunto duly authorized.

The undersigned, on behalf of the applicant, acknowledges that this application and all exhibits thereto which are not designated as confidential are subject to public inspection pursuant to Section 250.9.1, Chapter 3, Title 10, California Code of Regulations. A request for confidentiality of certain documents may be requested pursuant to Section 250.10. If a request for confidential treatment is granted (or denied), the person making such request will be notified in writing.

I declare under penalty of perjury that I have read the foregoing application, including all Exhibits attached thereto, or filed therewith, and know the contents thereof, and that the statements therein are true and correct.

(Applicant)

Executed at _____

(Signature of Declarant)

Date _____

(Typed Name)

(Title)