



REQUEST FOR WAIVER – OREGON COLLECTION AGENCY REGISTRATION

For collection agencies whose head office is not located in Oregon, this form must be completed to qualify for a waiver of the Oregon location and trust account in an Oregon financial institution. You must provide the trust account information below and select one of the three options below. Submit this form with your Oregon Collection Agency registration application by uploading the document to the NMLS.

Company name: _____	NMLS ID: _____
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We request waiver of the following (select as many as are applicable):
<input type="checkbox"/> Oregon office location
<input type="checkbox"/> Trust account in an Oregon financial institution. Note: This waives only the requirement to have the trust account at an Oregon financial institution. You must have a trust account. Enter the trust account information in NMLS under the Bank Accounts section on the company's MU1. This account must be separate from the company's operating account.

To qualify for the waiver above, check one of the following:
<input type="checkbox"/> Applicant has been regulated as a collection agency by the State of Oregon for the two years immediately preceding this request.
<input type="checkbox"/> Applicant has been regulated as a collection agency by the State of _____, whose collection agency laws are similar to those of Oregon, for at least five years. We enclose a copy of the current license/registration certificate, proof of license or registration for five years from another state, and a copy of that state's licensing/registration regulations. Original license/registration date: _____ License/registration number: _____
<input type="checkbox"/> If neither of the proceeding apply: We enclose a \$15,000 surety bond or a rider to our existing \$10,000 bond, increasing it to \$15,000. By signing this request for waiver, we agree to provide prompt remittance of debtor funds to our clients. We also agree to make our books and records available for examination and to pay the cost of out-of-state audits by the Division of Financial Regulation, including travel, lodging, and per diem expenses.

We attest that the above statements are complete and true.

Signature: _____ Date: _____

