

## **COLORADO UNIFORM CONSUMER CREDIT CODE**

# **2019** SALES FINANCE (ASSIGNEE/SERVICER) <u>INITIAL</u> NOTIFICATION FORM

WEBSITE: <u>WWW.COAG.GOV/UCCC/RENEW</u> EMAIL: <u>UCCC@COAG.GOV</u> TELEPHONE: 720-508-6012

YOU MUST COMPLETE ALL SECTIONS AN	VOLUMUIST COMPLETE ALL SECTIONS AND FORMS				
IF A SECTION DOES NOT APPLY, PLEASE WRITE N/A. ENCLOSE CH					
RETURN TO:					
COLORADO DEPARTMENT OF LAW					
UNIFORM CONSUMER CREDIT CODE	MAKE CHECKS PAYABLE TO: COLORADO				
RALPH L. CARR COLORADO JUDICIAL CENTER	UNIFORM CONSUMER CREDIT CODE OR				
1300 BROADWAY, 6 <sup>TH</sup> FLOOR	COLORADO UCCC				
DENVER, CO 80203					
COMPLETE THE FOLLOWING:					
1. LEGAL NAME:					
2. ALL TRADE NAMES IN WHICH BUSINESS IS TRANSACTED:					
2. ALE HADE WANTED IN WHICH BOSINESS IS HARVSACTED.					
3. PHYSICAL ADDRESS OF PRINCIPAL OFFICE (MAY BE OUTSIDE COLORADO):					
4. DO YOU HAVE ANY ADDITIONAL LOCATION(S) WHERE YOU TAKE ASSIGNMENT	OF, PURCHASE, OR SERVICE CONSUMER CREDIT				
SALES/LEASES? (CIRCLE ONE) YES OR NO IF YES, YOU MUST					
5. ARE CONSUMER CREDIT SALES OR CONSUMER LEASES MADE OTHER THAN AT	·				
(CIRCLE ONE) YES OR NO IF YES, HOW? MAIL INTERNET OT	THER				
6. DATE IN WHICH ASSIGNMENT/PURCHASE/SERVICE OF CONSUMER CREDIT TRA	ANSACTIONS COMMENCED IN COLORADO:				
7. DO YOU ONLY ENGAGE IN CONSUMER CREDIT SALES (EXTENSION OF CREDIT A	S DART OF THE DIRCHASE OR LEASE OF COORS				
SERVICES, A MOBILE HOME, OR AN INTEREST IN LAND) AS OPPOSED TO MAKING,	·				
SUPERVISED LOANS (DIRECT LOANS TO CONSUMERS IN EXCESS OF 12% APR)?	•				
IF YOU ANSWER "NO"—MEANING THAT YOU ARE ALSO MAKING, SERVICING, O	· ·				
YOU MUST OBTAIN A SUPERVISED LENDER'S LICENSE.	N TAKING ASSIGNMENT OF SOF ENVISED EGANS				
8. NAME & ADDRESS OF COLORADO REGISTERED AGENT UPON WHOM SERVICE (	OF DROCESS MAY BE MADE:				
6. NAME & ADDRESS OF COLONADO REGISTERED AGENT OF ON WHOM SERVICE O	OF TROCESS WAT BE WASE.				
FEE SCHEDULE					
1. NOTIFICATION FEE	\$ 200.00				
2. VOLUME FEE	,				
A. TOTAL OF THE ORIGINAL UNPAID BALANCE OF CONSUMER CREDIT SALES					
AND CONSUMER LEASES TAKEN BY ASSIGNMENT IN 2018	\$				
B. VOLUME FEES DUE (SEE MEMO FOR CALCULATION INSTRUCTIONS)					
\$20 FOR EACH \$100,000 OR PART THEREOF OF TOTAL FROM LINE 2A.	\$				
3. LATE FEE* (IF APPLICABLE)	\$				
4. TOTAL FEES DUE	\$				
*NOTIFICATIONS FILED AFTER 30 DAYS OF COMMENCING BUSINESS MUST I	•				
CALENDAR DAY IMPOSED STARTING THE 31 <sup>51</sup>					
THE UNDERSIGNED HEREBY FILES NOTIFICATION OF INTENT TO ENGAGE IN TAKIN					
AND COLLECTING OR ENFORCING RIGHTS UNDER COLORADO CONSUMER CR I HEREBY VERIFY THAT THE INFORMATION STATED ABOVE AND THE A					
THEREBY VERIFY THAT THE INFORMATION STATED ABOVE AND THE A	WIGONT FAID ARE TRUE AND CORRECT.				
<u>X</u>					
SIGNATURE OF OWNER/OFFICER/PARTNER DATE					
· · · · · · · · · · · · · · · · · · ·	HONE NUMBER E-MAIL ADDRESS				
MANDATORY INFORMATION FOR SOLE PROPRIETORS AND INDIVIDUAL REGISTRANTS (NOT OPEN TO	·				
BY §§ 14-14-113 AND 24-31-107, C.R.S. AND MAY BE USED TO REVOKE, SUSPEND, OR DENY LICENSES OR NOTIFICATIONS AS DETERMINED BY THE STATE CHILD SUPPORT ENFORCEMENT AGENCY FOR NONCOMPLIANCE WITH SUPPORT ORDERS OR SUBPOENAS/WARRANTS RELATING TO PATERNITY AND CHILD SUPPORT.					
ALSO INCLUDE A PHOTOCOPY OF YOUR DRIVER'S LICENSE, STATE IDENTIFICATION CARD, OR OTHER					
COMPLETE HOME ADDRESS:	SSN:				
COM LETE HOME ADDRESS.	3314.				

## <u>2019 CONTACT INFORMATION LIST</u> Colorado Uniform Consumer Credit Code

Please provide the following information and return with your notification form. Company Name: \_\_\_\_\_ Contact Person for Notification Questions and General Mailings: Address: Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Contact Person for Compliance Examinations:

Name:

Title: Same as Above: Address: Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_ <u>Contact Person for Consumer Complaints:</u> Same as Above:
Name: Contact Person for Consumer Complaints: Same as Above: Title: \_\_\_\_\_ Address: Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_

### **2019 LIST OF ASSIGNORS**

#### Colorado Uniform Consumer Credit Code

IF YOU TAKE ASSIGNMENT OF, PURCHASE, OR SERVICE CONSUMER CREDIT SALES AND LEASES, YOU MUST COMPLETE THE FORM PROVIDED BELOW.

LIST THE NAME AND COMPLETE MAILING ADDRESS OF EACH COMPANY FROM WHICH YOU TAKE ASSIGNMENT OF, PURCHASE, OR SERVICE CONSUMER CREDIT SALES AND LEASES. ATTACH ADDITIONAL SHEETS IF NECESSARY.

NAME OF ASSIGNOR(S)	MAILING ADDRESS(ES)		
	Address		
	Address		
	City	State	Zip Code
	Address		
	City	State	Zip Code
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	Addison		
	Address		
	City	State	Zip Code
	Address		
	City	State	Zip Code
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	Address		
	City	State	Zip Code
	Address		
	City	State	Zip Code
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	Address		
	City	State	Zip Code

## 2019 OWNERSHIP-COLLECTION ACTIVITY QUESTIONNAIRE Colorado Uniform Consumer Credit Code

Please provide the following information and return with your notification form.

Company Name:	
Provide the names of the owners, the percentage of each owner's, s	stockholders of the corporation, or the members of the limited liability company and tockholder's, or member's ownership interest. For corporations: If publicly traded, ore of the stock; If privately held, the number of shares must equal 100% of stock.
Name	% of Stock or Member Ownership
_	<u> </u>
	Collection Activity ss of each collection agency, engaged by the notifier, to collect defaulted Colorado . (Attach additional pages if necessary)
Name of Company	Address
2. Provide the name and address transactions. (Attach addition	ess of each debt buyer to whom the notifier sold defaulted Colorado consumer credit nal pages if necessary)
Name of Company	$\underline{\mathrm{Address}}$
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# 2019 LIST OF LOCATIONS

## Colorado Uniform Consumer Credit Code

LIST ALL OFFICES, RETAIL STORES, AND LOCATIONS WHERE CONSUMER CREDIT SALES/LEASES ARE MADE. ATTACH ADDITIONAL SHEETS IF NECESSARY.

State	Zip Code	
State	7in Code	
State	2,5 6646	
State	Zip Code	
State	Zip Code	
State	Zip Code	
State	Zip Code	
State	Zip Code	
	State  State  State  State	State Zip Code  State Zip Code  State Zip Code  State Zip Code