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STATE OF COLORADO
DEPARTMENT OF LAW

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Consumer Protection Section
Consumer Credit Unit

NOTICE OF COLLECTIONS MANAGER CHANGE FORM

Licensed collection agencies should use this form to report any changes to their Collections Manager. Per § 5-16-122(3)(a), C.R.S. and Rule 1.01, Rules of the Administrator, a licensee must notify the Administrator within 30 days of such change. For the required qualifications a Collection Manager must meet, please refer to §§ 5-16-119(1)(a) and 5-16-123(2), C.R.S.

Collection Agency Name:		Collection Agency License #:
Name of person to Contact regarding this change:	Phone Number:	Email Address:
Select ONE of the following:		
___ New Collections Manager replaces existing approved Collections Manager on file		
___ New Collections Manager is serving as a backup to existing Collections Manager on file.		
Name of NEW Collections Manager:		
Name of Existing (approved) Collections Manager:		
Date Existing (approved) Collections Manager ceased role:		

Statements made herein are made under oath. False statements may be punishable as second-degree perjury.

 Signature Date

 Printed Name

COLLECTIONS MANAGER FORM

OMISSIONS MAY BE CONSTRUED AS INTERNTIONAL FAILURE TO DISCLOSE A MATERIAL FACT AND MAY BE SUFFICIENT GROUNDS FOR DENIAL OF APPLICATION.

Collection Agency Name _____

Collection Agency License # _____

Collections Manager Name _____

Home Address

(Street Address) (City) (State) (Zip)

Direct Phone No. _____ Email _____

Date of Birth _____ Social Security No. _____

(The above information is required by §§ 14-14-113 and 24-34-107, C.R.S. and may be used to revoke, suspend, or deny licenses as determined by the state child support enforcement agency for noncompliance with support orders or subpoenas/warrants relating to paternity and child support.)

Record: Occupational Record: Furnish a complete record of employment or business association for the last six years, including all companies in which you have an interest as an officer, director, voting stockholder, member or partner. Account for all periods of time, including unemployment (or attach a detailed resume showing your employment history):

Dates (MM/YY): _____ TO _____

Employer: _____

Position: _____

Address: _____

Duties (brief description):

Dates (MM/YY): _____ TO _____

Employer: _____

Position: _____

Address: _____

Duties (brief description):

Dates (MM/YY): _____ TO _____

Employer: _____

Position: _____

Address: _____

Duties (brief description):

Dates (MM/YY): _____ TO _____

Employer: _____

Position: _____

Address: _____

Duties (brief description):

QUESTIONS FOR COLLECTIONS MANAGER

1. Have you been approved as a collections manager by the Administrator, Colorado Fair Debt Collection Practices Act?

No _____ Yes _____ *If Yes, provide dates of approval and the name of the Collection Agency for which you worked.*

2. Have you ever been convicted of or entered a plea of guilty or nolo contendere to a felony?

No _____ Yes _____ *If Yes, provide details (attach additional pages if necessary)*

3. Have you ever been convicted of or entered a plea of guilty or nolo contendere to theft, concealing stolen goods, forgery, impersonation, simulation, fraud, fraudulent and deceptive sales and business practices, Uniform Consumer Credit Code offenses, computer crimes or financial transaction device offenses?

No _____ Yes _____ *If Yes, provide details (attach additional pages if necessary)*

4. Are there any pending charges against you for theft, concealing stolen goods, forgery, impersonation, simulation, fraud, fraudulent and deceptive sales and business practices, Uniform Consumer Credit Code offenses, computer crimes or financial transaction device offenses?

No _____ Yes _____ *If Yes, provide details (attach additional pages if necessary)*

5. Have you, or any organization during a time you were associated with it as owner, partner, member if an LLC or association, officer, director or principal employee, ever had a business license or registration suspended, canceled, revoked, or subjected to any disciplinary action (whether or not a final order or judgment was entered) by any governmental entity; had an application for such a license or registration denied; or withdrawn such an application to avoid a denial or any related request?

No _____ Yes _____ *If Yes, provide details (attach additional pages if necessary)*

6. Do you currently hold or have you held a license or registration as a collection agency, debt collector, solicitor, collections manager, lender, mortgage, or other financial services provider issued by any other governmental agency, including Colorado?

No _____ Yes _____ *If Yes, provide details (attach additional pages if necessary)*

Approval as collections manger is contingent upon filing a satisfactory form, meeting the minimum qualifications stated in § 5-16-119(1)(a), C.R.S., having none of the disqualifications stated in § 5-16-123(2)(a), C.R.S., and employment by a licensed collection agency.

Statements made herein are made under oath. False statements may be punishable as second-degree perjury.

Signature _____
Date

Printed Name