PHIL WEISER
Attorney General
NATALIE HANLON LEH
Chief Deputy Attorney General

ERIC R. OLSON
Solicitor General
ERIC T. MEYER
Chief Operating Officer



STATE OF COLORADO DEPARTMENT OF LAW

RALPH L. CARR
COLORADO JUDICIAL CENTER
1300 Broadway, 6th Floor
Denver, Colorado 80203
Phone (720) 508-6020

Consumer Protection Section Consumer Credit Unit

COLORADO COLLECTION AGENCY LICENSE APPLICATION INSTRUCTIONS

Those acting as a collection agency must possess a valid license issued by the Administrator in accordance with the Colorado Fair Debt Collection Practices Act ("CFDCPA"). The CFDCPA applies to the following collection agencies or debt collectors:

- 1. Collection agencies located within this state;
- 2. Collection agencies outside this state that collect or attempt to collect from consumers who reside within this state for a creditor with a place of business located within this state;
- 3. Collection agencies outside this state that regularly collect or attempt to collect from consumers who reside within this state for a creditor with a place of business located outside this state; or
- 4. Collection agencies outside this state that solicit or attempt to solicit debts for collection from a creditor with a place of business located within this state;
- 5. Debt/judgment buyers that are now the owners of debts that were in default at the time they acquired ownership of those debts;
- 6. Creditors that collect their own debts using another name, which would indicate that a third person is collecting or attempting to collect such debts.

Attorneys engaged in debt collections do not need a collection agency license but must comply with the substantive provisions of the CFDCPA and are subject to the Administrator's enforcement authority.

Collection agencies that collect debt for commercial, business, investment or agricultural purposes are not subject to the CFDCPA and do not need a collection agency license.

Creditors who collect their own debts in their own name are not subject to the CFDCPA and do not need to be licensed.

Your organization's initial license application should be sent to:

Colorado Department of Law Consumer Credit Unit – Debt Collection Ralph L. Carr Colorado Judicial Center 1300 Broadway, 6th Floor Denver, CO 80203

LICENSING & INVESTIGATION FEES

The one-time investigation fee is \$500, which is due with your initial application pursuant to § 5-16-119(3), C.R.S. and 4 CCR 903-1 Rule 1.02.

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The licensing fee is \$1,100 and is due after notification that your application is complete. **Do not submit the licensing fee until after you are notified that your submitted application has been approved.**

Each fee must be sent by check (subsequent, renewal fees may be paid electronically). Checks should be made payable to: "Colorado Fair Debt Collection Practices Act" and mailed to the address listed in the previous section (above).

IMPORTANT REQUIREMENTS

- ➤ Branch Offices. A collection agency may have branch offices. Only the principal place of business must be licensed. Notification of a new branch location must be received no later than thirty (30) days after the branch commences business. This is a continuing obligation.
- Colorado Office. Licensed collection agencies must maintain a Colorado office open to the public during normal business hours. The office must be staffed by at least one full-time employee with access to consumer payment records, client account records, and who accepts consumer payments. This need not be a "working office" with debt collectors, solicitors, or a collections manager and may be shared with other businesses if all signs and directories are clearly marked and you are able to receive mail at this location. Pursuant to 4 CCR 903-1 Rule 1.09(2), a collection agency that uses a third-party to provide a local Colorado office is responsible for actions of the third-party that violate the CFDCPA.

The following provisions under the CFDCPA" are not found in the Federal Fair Debt Collection Practices Act:

- The first written notice with Colorado consumers must contain specific information about Colorado consumer rights. More specific information is provided in the next section (below).
- "Meaningful disclosure" of a debt collector's identity within 60 seconds of contact with the debtor. See § 5-16-106(1)(f), C.R.S.
- Prohibits a collection agency from invoking a cognovit clause (confession of judgment). See § 5-16-125(2), C.R.S.
- Liability for harassment of a consumer's employer and family in an invasion of privacy action. See § 5-16-113(8), C.R.S.
- ➤ Bond requirement (cash or surety bond). See §§ 5-16-123(1)(c), (d) and 5-16-124, C.R.S.
- Licensure requirement of collection agencies see § 5-16-115, C.R.S.
- Licenses may be revoked or suspended, letters of admonition may be issued to licensees or fined \$1,500 per violation, and certain violations of the CFDCPA are criminal misdemeanors. §§ 5-16-126 and 5-16-127(10)(b), C.R.S. Rules and regulations on standards of behavior may be issued by the Administrator.
- ➤ Debts cannot be reported to consumer reporting agencies and credit bureaus sooner than 30 days after mailing of the initial written notice. This does not apply to check collection or if there is no valid known address for the consumer. See § 5-16-108(1)(j), C.R.S.
- Collection agencies are mandated to have a toll-free telephone number. See § 5-16-123(1)(b)(II), C.R.S.

The Colorado Fair Debt Collection Practices Act, Colorado Child Support Collection Consumer Protection Act, and 4 CCR 903-1 Rules can be found on our website: coag.gov/licensing/car/.

REQUIRED DOCUMENTS

A collection agency cannot conduct business until it has obtained a collection agency license. A collection agency may only use the name(s) appearing on the collection agency license. Your application should therefore include all legal and trade names used in debt collection. Those seeking licensure must submit:

1. **Application with Investigation Fee.** Complete and originally sign this application and send it with the one-time investigation fee of \$500. If we notify you of any deficiencies in your application, you will have 90 days to cure those deficiencies. Otherwise, your license application will be considered null and void.

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- 2. **Personal Affidavits.** You must provide a Personal Affidavit (form enclosed) for <u>every collection</u> <u>agency owner, partner, member or officer</u>. Please ensure each Affidavit is complete and originally signed.
- 3. Collections Manager. A collections manager is required to supervise debt collectors and be responsible for compliance with the CFDCPA. Approval of a collections manager is based on the applicant's minimum experience required in the CFDCPA § 5-16-119(1)(a)(I), C.R.S., and the absence of conviction of a financial crime. The Administrator has the authority to conduct an investigation to determine an applicant's qualifications. Please ensure the Collections Manager Form (enclosed) is complete and originally signed.
- 4. **Financial Responsibility.** Provide financial responsibility in the form of a cash bond or surety bond (form enclosed), with the exception of debt buyers. The minimum amount is \$12,000 and the maximum amount is \$20,000. For more information about the financial responsibility requirements and determining the amount needed, review § 5-16-124(1), C.R.S.
- 5. **Financial Statement.** Provide a financial statement for the previous year on the designated form (enclosed). Your financial information must provide information of all your agency's assets, liabilities, and net worth.
- 6. Bank Account Information and Out-of-State Trust Affidavit (if applicable). Licensed collection agencies (not debt buyers) must maintain a Trust Account for the benefit of its clients and must contain, at all times, sufficient funds due and owing to its clients. The trust account must be maintained in a commercial bank, industrial bank or savings and loan association. The bank account must be clearly designated as a trust account and must not be used as an operating account. Provide a list of all trust and operating account information on the Bank Account Information (form enclosed). If any trust account(s) are maintained in bank(s) outside of Colorado, provide a Trust Account Affidavit for each account (form enclosed). See § 5-16-123(1)(a), C.R.S. for more information.
- 7. Sample Validation/First Notice. Pursuant to §§ 5-16-105(3)(c) and (d), 5-16-107(1)(l), 5-16-109(1)(a) through (e), 5-16-123(1)(b)(l) and (II), C.R.S., and 4 CCR 903-1 Rule 2.01, initial communication in connection with debt collection must contain specific information. Please provide a sample validation/first notice containing Colorado specific consumer rights advisory. Specifically, the first written notice must print the following statements:
 - "FOR INFORMATION ABOUT THE COLORADO FAIR DEBT COLLECTION PRACTICES ACT, SEE WWW.COAG.GOV/CAR" [or the current website address]. See § 5-16-105(3)(c), C.R.S.
 - "A consumer has the right to request in writing that a debt collector or collection agency cease further communication with the consumer. A written request to cease communication will not prohibit the debt collector or collection agency from taking any other action authorized by law to collect the debt." See § 5-16-105(3)(d), C.R.S.
 - The address and telephone number of the agency's local Colorado office. This requirement also applies to the agency's subsequent written communications to a consumer to collect a debt. See § 5-16-123(1)(b)(I)(B), C.R.S.
- 8. **Branch Office List.** If the collection agency has branch offices, list the addresses and phone numbers for each branch location (form enclosed). Pursuant to § 5-116-119(6), C.R.S., a collection agency must notify the administrator in writing of the location of each branch office within 30 days after the branch commences business.
- 9. **Debt Collector/Solicitor List**. Pursuant to CFDCPA § 5-16-123(2), C.R.S., a debt collector or solicitor cannot have a conviction of a financial crime. Debt collectors may only use one alias consisting of both a first and last name. Collectors may not share the same alias. Please list all currently employed debt collectors and solicitors (form enclosed).

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- 10. **License Verification(s).** Applicants licensed by other state agencies must complete the top of the License Verification Form (enclosed) and mail one to each of the agencies where licensed. Please attach copies of all forms you mailed, so we are able to track receipt of the forms from the other regulatory agencies.
- 11. **Debt Purchaser Agreement (if applicable).** If the collection agency is a debt buyer only, provide the debt purchase agreement.
- 12. **DBA, Trade or Assumed names.** If the collection agency uses a trade name, attach a copy of the properly filed trade name documentation, showing the trade/assumed name, from the Colorado Secretary of State. Contact the Colorado Secretary of State at (303) 894-2200, or go to: www.sos.state.co.us, for more information.
 - Collection agencies who are not required to file with the Colorado Secretary of State may substitute similar tradename approval from the state in which the collection agency is located.

13. Other documentation.

- a. For Corporations: Attach a copy of the Articles of Incorporation, Certificate of Authority or Good Standing, or Statement of Foreign Entity Authority from the Colorado Secretary of State, or application therefore containing the filing date and account number. Contact the Colorado Secretary of State at (303) 894-2200, or go to: www.sos.state.co.us, for more information. Collection agencies who are not required to file with the Colorado Secretary of State, may substitute similar certificates from the state in which the loan office is located.
- b. For Limited Liability Companies: Attach a copy of the Certificate of Organization, Certificate of Authority or Good Standing, or Statement of Foreign Entity Authority from the Colorado Secretary of State. Contact the Colorado Secretary of State at (303) 894-2200, or go to: www.sos.state.co.us, for more information.
 - Collection agencies who are not required to file with the Colorado Secretary of State, may substitute similar certificates from the state in which the loan office is located.
- c. For Partnerships: Attach a copy of the Partnership Agreement. A limited partnership must also submit a copy of the recorded certificate filed with the Colorado Secretary of State, as required by § 7-61-103, C.R.S. Contact the Colorado Secretary of State at (303) 894-2200, or go to: www.sos.state.co.us, for more information.
- 14. Licensing Fee. Once your application has been approved, we will request \$1,100 licensing fee.

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COLORADO COLLECTION AGENCY LICENSE APPLICATION CHECKLIST

Completed Application with Investigation Fee of \$500. You must complete this application and submit it with original signatures and a check payment for the investigation fee.

Personal Affidavits. You must submit a Personal Affidavit (enclosed) for <u>every collection agency</u> owner, partner, member or officer. Personal Affidavits must have an original signature as well.

Collections Manager Form. You must submit a Collections Manager Form (enclosed) demonstrating the Collections Manager meets the requirements in the CFDCPA.

Financial Responsibility. You must submit proof of financial responsibility in the form of a cash bond or surety bond (form enclosed).

Financial Statement. You must submit a Financial Statement for the last year. Use the enclosed form.

Bank Account Information and Trust Account Affidavit(s) (if applicable). Complete the Bank Account Information and, if any of the trust account(s) are maintained in bank(s) outside of Colorado, submit an Out-of-State Trust Account Affidavit for each account.

Sample Validation/First Notice. You must submit a sample Validation/First Notice used in initial communication in connection with debt collection.

Branch Office List (if applicable). If there are branch locations, submit a list (form enclosed).

Debt Collector/Solicitor List. You must provide a list of currently employed collectors and solicitors (form enclosed).

License Verification(s). You must complete the top part of the License Verification Form (enclosed) and send to each agency where you hold a license as a collection agency. Please provide copies of your sent forms with the application, so we can track receipt from each state.

Debt Purchase Agreement (if applicable). You must submit your debt-purchase agreement, if applicable.

License Verifications. You must complete the top part of the License Verification Form (enclosed) and send to each jurisdiction you hold a license as a collection agency, debt collector, payday lender or other financial services provider.

Trade/DBA Name documentation (if applicable). You must submit proof of the trade/DBA name approval filed with the Colorado Secretary of State or *another jurisdiction.

Organizational documentation. Provide a copy of Certificate of Authority or Good Standing or similar (corporations); copy of Certificate of Organization or similar (LLCs); copy of Partnership Agreement (partnerships). Collection agencies who are not required to file with the Colorado Secretary of State may substitute similar certificates/tradename approval from the state in which the office is located.

Licensing Fee. Once your application has been approved for licensure, we will request the \$1,100 licensing fee.

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COLORADO COLLECTION AGENCY LICENSE APPLICATION ORGANIZATIONAL INFORMATION

Legal name of applicant (corporation, limited liability company, partnership, or individual person's name):

Trade names used in collections, (if di	ifferent from above – see the Instructions):		
Principal business location:			
(Street address)	(City)	(State)	(Zip code)
Mailing address:			
(Street address)	(City)	(State)	(Zip code)
Colorado office address:			
(Street address)	(City)	(State)	(Zip code
Colorado office phone number:			
Mandatory toll-free phone number an (Toll-free number)	nd other phone numbers for principal place of (Non-toll-free number) (F	business: fax number - if applic	able)
Contact Information – Provide the na following categories:	ame, mailing address, phone number and ema	il address for each	of the
Licensing/Regulatory Compliance:	(Contact's name)		
(Contact's phone number)	(Contact's email address)		
(Contact's mailing address)	(City)	(State)	(Zip code)
Complaints:	(Contact's name)		
(Contact's Phone Number)	(Contact's email address)		
(Contact's mailing address)	(City)	(State)	(Zip code)

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Corporations			
State of incorporation	D	Date of incorporation	on or formation/organization:
President:			
Secretary:			
Treasurer:			
CEO:			
Other principal employees ar	nd directors:		
Limited Liability Companie	s		
State of organization:			Date:
Name of managing membe	r:		
Please list the names and o additional pages if necessar	-	titles of other mem	bers acting in leadership roles, if any. Attach
, ,			
Corporations and Limited I	Liability Comp	oanies with Stock	
			icly traded, list all entities holding 10% or more of the f stock. Attach additional pages if necessary.
Partnerships			
State of formation:			Date:
Type of Partnership:	General	Limited	(if Limited, include each partner's share)

List names of partners – general and limited. Attach additional pages if necessary.

Legal name of p	roprietor:	First date	e of operation:	
Home address:	(Street address)	(City)	(State)	(Zip code)

Social security number:

Sole Proprietors

Date of birth:

(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).

QUESTIONS FOR ORGANIZATION

1. Describe in detail the collections experience of at least one executive officer and/or the collections manager (See CFDCPA, § 5-16-119(1)(a), for minimum qualifications):

- 2. Name of Collections Manager:
- 3. Has the agency seeking licensure ("Applicant") had a business license or registration suspended, canceled, revoked, or subjected to any other disciplinary action (whether or not a final order or judgment was entered), including a stipulation, final consent order, judgment, or administrative order, by any governmental entity, including Colorado; had an application for such license or registration denied, or withdrawn to avoid a denial or any related request?

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

4.			any pending administrative , state, or local jurisdiction?	or disciplinary action or outstanding consumer?
	Yes	No	If Yes, provide details (attach	h additional pages if necessary).
5.			en involved in any voluntaı ınsatisfied judgments or lie	ry or involuntary bankruptcy, receivership or insolvency
		No		ch additional pages if necessary).
6	Diametrical		The effect the Arelton of the	
6.				currently licensed or registered as a collection agency, A current list containing the requested information
			low. Attach additional page	· · · · · · · · · · · · · · · · · · ·
_				
Re	egulatory agenc	y name:		
Re	egulatory agenc	y address:		
Ту	pe of license/re	egistration:		
Lic	cense/Registrat	ion # (if one):	Date first licensed/registered:
Re	egulatory agenc	y name:		
Re	egulatory agenc	y address:		
Ту	pe of license/re	egistration:		
Lic	cense/Registrat	ion # (if one	·):	Date first licensed/registered:

	Regulatory agency name:				
	Regulatory agency address:				
	Type of license/registration:				
	License/Registration # (if one):	Date first licensed/registered:			
	Regulatory agency name:				
	Regulatory agency address:				
•	Type of license/registration:				
	License/Registration # (if one):	Date first licensed/registered:			
7.	Is the Applicant a debt-purchaser or debt-buyer ONLY of debts for collection, from other creditors, debt-buyer		Yes	No	
8.	Does the Applicant collect debts from consumers in the lif Yes, what percentage of your accounts are debts own	,	Yes	No	%
9.	Does the Applicant record phone conversations with 9a. If Yes, how long are these recordings retained?	consumers?	Yes	No	
sh th	orporations should include the signature of the Preside nould include the signature of the managing member. For the Partnership Agreement. Statements made herein are as second-degree perjury.	Partners must sign individually or in a	ccordance	e with	•
C	ignature of owner, partner or officer	Date			
3	ignature of owner, partner of officer	Date			
Р	Print name & title				
Ν	Name, direct phone number and email address of persor	n who should be contacted about this	applicatio	n:	
N	lame	Phone number			
Ε	mail address				

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COLORADO COLLECTION AGENCY LICENSE PERSONAL AFFIDAVIT

To be completed by each individual owner, member, officer, partner or sole proprietor. A separate affidavit is to be filed by each person and each affidavit must be <u>originally signed</u>.

Statements made herein are made under oath. Omissions may be construed as intentional failure to disclose a material fact and may be grounds for rejection of an application [see § 5-16-120(2), C.R.S.].

Collection agency's name:					
Name and title of person completing affidavit:					
Name		:	Title		
Home Address:					
Street Address		City		State	Zip Code
Date of birth:		SSN (las	st four ONLY):		
Employment History					
Provide a complete record of employment and business associations for the last six years, including all companies in which you have or had an interest as an officer, director, or voting stockholder. Account for all periods of time. Periods of unemployment should be indicated with dates. Include your position and a brief description of duties. A current resume containing the requested information may substitute the list. Attach additional pages if necessary.					
Dates (MM/YY):	ТО				
Employer:					
Position Title:					
Duties (brief description):					
Dates (MM/YY):	ТО				
Employer:					
Position Title:					
Duties (brief description):					

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Dat	es (MM/Y	Y):	то		
Em	ployer:				
Pos	ition Title:				
Dut	ies (brief d	description):			
Lice	ense/Regis	stration History			
coll ent	Please list all licenses or registrations you hold or have held as a collection agency, debt collector, solicitor, collections manager, lender, mortgage, or other financial services provider in Colorado or any other regulatory entity. A current list containing the requested information may substitute the list below. Attach additional pages if necessary.				
Reg	gulatory ag	gency name:			
Reg	gulatory ag	gency address:			
Тур	e of licens	e/registration:			
Lice	ense/Regis	tration # (if one):	Date first licensed/registered:		
Reg	gulatory ag	gency name:			
Reg	gulatory ag	gency address:			
Тур	e of licens	e/registration:			
Lice	ense/Regis	tration # (if one):	Date first licensed/registered:		
Reg	Regulatory agency name:				
Reg	gulatory ag	ency address:			
Тур	e of licens	e/registration:			
1.	Have you	ever been convic	ted of or pled guilty or nolo contendere to a felony?		
	Yes	No	If Yes, provide details (attach additional pages if necessary).		

2.	imperson	ation, simulati	victed of or pled guilty or nolo contendere to theft, receiving stolen property, forgery, on, fraud, fraudulent and deceptive sales and business practices, offenses related to redit Code, computer crimes, financial transaction devices or other similar offenses?
	Yes	No	If Yes, provide details (attach additional pages if necessary).
3.	property, offenses	forgery, imper	iminal charges against you for a felony offense or involving theft, receiving stolen conation, simulation, fraud, fraudulent and deceptive sales and business practices, niform Consumer Credit Code, computer crimes, financial transaction devices or
	Yes	No	If Yes, provide details (attach additional pages if necessary).
4.	if an LLC of suspende judgment	or association, d, canceled, re t was entered),	ation during a time when you were associated with it as an owner, partner, member officer, director, or principal employee, ever had a business license or registration woked, or subjected to any other disciplinary action (whether or not a final order or by any governmental entity, including Colorado; had an application for such license withdrawn to avoid a denial or any related request?
	Yes	No	If Yes, provide details (attach additional pages if necessary).

J.	if an LLC o	or association	, officer, director, or princ	ipal employee, bee	en involved in any voluntary or involusatisfied judgments or liens against y	untar
	Yes	No	If Yes, provide deta	ails (attach additiona	l pages if necessary).	
6.	•	ever been he ocal governm No	•		al or administrate proceeding by a fed	deral,
Sta	tomonts m	aada harain a	ro mado undor oath Fals	o statoments may l	be punishable as second-degree per	ricery
Jia	iterrients ii	iaue lieleili a	re made under Oath. Pais	e statements may i	be pullistiable as second-degree per	jui y.
Prii	nt name of	individual su	omitting this affidavit	Title/position		
Sig	nature				Date	

COLORADO COLLECTION AGENCY LICENSE COLLECTIONS MANAGER FORM

Statements made herein are made under oath. Omissions may be construed as intentional failure to disclose a material fact and may be grounds for rejection of an application [see § 5-16-120(2), C.R.S.].

Collection agency's name:				
Collections manager's name:				
Home address:				
Street address		City	State	Zip code
Direct phone number:		Email address:		
Date of birth:		SSN (last four ONLY):		
in which you have or had an ir Periods of unemployment sho	nterest as an officer, direct ould be indicated with date	associations for the last six year or, or voting stockholder. Accor s. Include your position and a b may substitute the list. Attach a	unt for all period orief description o	s of time. of duties.
Dates (MM/YY):	ТО			
Employer:				
Position Title:				
Duties (brief description):				
Dates (MM/YY):	то			
Employer:				
Position Title:				
Duties (brief description):				
Dates (MM/YY):	TO			

Em	ployer:			
Pos	ition Title:			
Dut	ies (brief descri	ption):		
Plea coll ent	ections manage	es or registration r, lender, mortg	ns you hold or have held as a collection agency, debt collector, solicitor, age, or other financial services provider in Colorado or any other regulatory requested information may substitute the list below. Attach additional pages if	
Reg	gulatory agency	name:		
Reg	gulatory agency	address:		
Тур	e of license/reg	istration:		
Lice	License/Registration # (if one): Date first licensed/registered:			
Reg	gulatory agency	name:		
Reg	gulatory agency	address:		
Тур	e of license/reg	istration:		
Lice	ense/Registratio	n # (if one):	Date first licensed/registered:	
Reg	gulatory agency	name:		
Reg	gulatory agency	address:		
1.	 Have you been approved as a collections manager by the Administrator of the Colorado Fair Debt Collection Practices Act (CFDCPA)? 			
	Yes	No	If Yes, provide details of when and with which collection agency you were with when approval was granted:	
2.	Have you ever	been convicted (of or pled guilty or nolo contendere to a felony?	
	Yes	No	If Yes, provide details (attach additional pages if necessary).	

3.	impersonation	, simulation, fi	d of or pled guilty or nolo contendere to theft, receiving stolen property, forgery, raud, fraudulent and deceptive sales and business practices, offenses related to t Code, computer crimes, financial transaction devices or other similar offenses?
	Yes	No	If Yes, provide details (attach additional pages if necessary).
4.	property, forge	ery, impersonand to the Uniform	al charges against you for a felony offense or involving theft, receiving stolen tion, simulation, fraud, fraudulent and deceptive sales and business practices, rm Consumer Credit Code, computer crimes, financial transaction devices or
	Yes	No	If Yes, provide details (attach additional pages if necessary).
5.	if an LLC or ass suspended, ca judgment was	sociation, offic nceled, revoke entered), by a	n during a time when you were associated with it as an owner, partner, member er, director, or principal employee, ever had a business license or registration ed, or subjected to any other disciplinary action (whether or not a final order or ny governmental entity; had an application for such license or registration id a denial or any related request?
	Yes	No	If Yes, provide details (attach additional pages if necessary).

7. Have you ever been held liable in any civil fraud action in any judicial or administrate proceeding by a state, or local governmental entity? Yes No If Yes, provide details (attach additional pages if necessary). Approval as a collections manager is contingent upon filling a satisfactory form, meeting the minimum qualifications in § 5-16-119(1)(a), C.R.S., having none of the disqualifications in § 5-16-123(2)(a), C.R.S., a employment by a licensed collection agency. Statements made herein are made under oath. False statements may be punishable as second-degree p	Have you, or any organization during a time when you were associated with it as an owner, partner, memb if an LLC or association, officer, director, or principal employee, been involved in any voluntary or involunta bankruptcy, receivership, or insolvency proceedings, or had any unsatisfied judgments or liens against you such an organization?								involuntary					
Yes No If Yes, provide details (attach additional pages if necessary). Approval as a collections manager is contingent upon filing a satisfactory form, meeting the minimum qualifications in § 5-16-119(1)(a), C.R.S., having none of the disqualifications in § 5-16-123(2)(a), C.R.S., a employment by a licensed collection agency. Statements made herein are made under oath. False statements may be punishable as second-degree p	Yes			No		If Yes,	provide d	details (a	ttach add	ditional p	ages if ne	ecessary	·).	
Yes No If Yes, provide details (attach additional pages if necessary). Approval as a collections manager is contingent upon filing a satisfactory form, meeting the minimum qualifications in § 5-16-119(1)(a), C.R.S., having none of the disqualifications in § 5-16-123(2)(a), C.R.S., a employment by a licensed collection agency. Statements made herein are made under oath. False statements may be punishable as second-degree p														
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Yes No If Yes, provide details (attach additional pages if necessary). Approval as a collections manager is contingent upon filing a satisfactory form, meeting the minimum qualifications in § 5-16-119(1)(a), C.R.S., having none of the disqualifications in § 5-16-123(2)(a), C.R.S., a employment by a licensed collection agency. Statements made herein are made under oath. False statements may be punishable as second-degree p														
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Print name of individual submitting this affidavit Title/position	emei	nts m	nade	herein a	re made u	ınder oath	n. False s	tateme	nts may	be puni	shable a	is secoi	nd-degre	ee perjury.
	t nar	me of	f indiv	/idual su	bmitting t	:his affidav	vit	Title/p	osition					
Signature Date	ature	e								Date				

COLORADO COLLECTION AGENCY LICENSE SURETY BOND

State of Colorado Administrator
Colorado Fair Debt Collection Practices Act
Ralph L. Carr Colorado Judicial Center
1300 Broadway, 6th Floor, Denver, CO 80203
Phone - (720) 508-6020
Email – <u>car@coag.gov</u>
www.coag.gov/car

KNOW ALL PERSONS BY THESE PRESENTS, that I/we

(collection agency's legal name) as principal

(hereinafter "licensee") and		as
surety whose address is		are held and
firmly bound unto the Attorney Gene	eral of the State of Colorado (hereinafte	er "Attorney General") for use of the
PEOPLE OF THE STATE OF COLORADO	O AND THE ADMINISTRATOR, COLORAD	O FAIR DEBT COLLECTION PRACTICES
ACT (hereinafter "the Administrator") in the sum of	(sum – written out)
entrusting to said licensee any accou executors, administrators, successors), lawful money of the United States to rsons, firms, corporations, limited liabili nt for collection, for which payment to s, and assigns, jointly and severally firm ms which may arise under this bond sha	ity companies, and partnerships be made we bind ourselves, our heirs ly by these presents. The surety's

This bond shall be effective on and after the day of , 20 , or, if left blank, the date of execution shall be the effective date of the bond. The bond shall be effective, if accepted by the Attorney General acting through the Administrator, without notice to the obligators.

The surety shall have the right to terminate or reduce its liability hereunder for future acts only by giving licensee and the Administrator written notice of such termination or reduction of liability, addressed by registered U.S. mail to the licensee at the address above given and to the Administrator, Colorado Fair Debt Collection Practices Act, Judicial Center, 1300 Broadway, 6th Floor, Denver, CO 80203 or its most current address. Such termination or reduction of liability for future acts shall be effective from and after the expiration of 30 days from the receipt of such notice by the Administrator or on such later date as is stated in the notice; provided, however, that no liability incurred while said bond is in force and prior to said effective date of termination or reduction of liability shall be released or reduced by the giving of such notice. The surety's liability for acts occurring prior to the effective date of cancellation or reduction of liability shall continue for two years after licensee's collection agency license is surrendered, revoked, or has expired.

After giving notice of termination or reduction of liability, the surety may reinstate or increase its liability by the execution and filing of a new bond or by mailing written notice to the Administrator indicating that the surety desires to continue as surety for the licensee and that its notice of termination or reduction of liability is withdrawn and rescinded.

1

WHEREAS, the licensee is now engaged, or intends to be engaged, in the business of a collection agency in the State of Colorado.

WHEREAS, the purposes of this bond are to insure from and after its effective date and during the term of the license and any renewal and as otherwise provided by law that licensee will, subject to the Colorado Fair Debt Collection Practices Act, make payment of the proceeds of all collections less charges for collection in accordance with the terms of the agreements made between said licensee and all of its clients; that said licensee will, upon written demand, turn over to its clients any and all notes, valuable papers, or evidence of indebtedness which may have been deposited with said licensee by its clients as required by law; and that said licensee, surety, or both will, upon written demand, pay to the Administrator the amount of any verified claims(s) which the Administrator preliminarily determines are correct and unpaid, for the use of licensee's clients.

NOW THEREFORE, the conditions of this bond are such that if the licensee:

- 1. Shall, upon written demand, and subject to the Colorado Fair Debt Collection Practices Act, account for and pay the proceeds of all collections less the charges for collection in accordance with the terms of the agreements made between said licensee and all of its clients, and
- 2. Shall upon written demand, and subject to the Colorado Fair Debt Collection Practices Act, turn over to its clients any and all notes, valuable papers, or evidence of indebtedness which may have been deposited with said licensee by its clients as required by law, and
- 3. Shall, in all respects, faithfully comply with all requirements of the Colorado Fair Debt Collection Practices Act and the rules and regulations of the Administrator relating to the aforesaid license of the licensee.

THEN THIS OBLIGATION IS TO BE NULL AND VOID, BUT OTHERWISE TO REMAIN IN FULL FORCE, VIRTURE AND EFFECT.

Name of collection agency	
Signature	Date
Print name	
	SURETY MUST ATTACH POWER OF ATTORNEY.
Surety Signature	Date
[SURETY SEAL]	

2 2/23/22

COLORADO COLLECTION AGENCY LICENSE FINANCIAL STATEMENT

Collection Agency Name

<u>Assets</u>

Other Liabilities

TOTAL LIABILITIES

TOTAL NET WORTH*

 Statement of Assets and Liabilities as of (date)
---	---

Cash on Hand	\$
Cash in Bank	
(a) Operating Accounts	\$
(b) Other Bank Accounts	\$
Accounts Receivable	\$
Property, Furniture & Fixtures	\$
Other Assets	\$
TOTAL ASSETS	\$
LIABILITIES	
Accounts Payable & Accrued Expenses	
(a) Current	\$
(b) Long Term	\$
Taxes payable	\$

IF A NEGATIVE NET WORTH IS REPORTED, ATTACH AN EXPLANATION TO THIS FORM.

\$

\$

^{*}Net Worth must equal Total Assets minus Total Liabilities

II. Trust Account § 5-16-123(1)(a), C.R.S., requires applicants (licensees) at all times to masum of not less than two thousand five hundred (\$2,500) dollars MORE					
I affirm that applicant (licensee/applicant) is in compliance with re	quirements of § 5-16-123(1)(a), C.R.S.				
-OR-					
I affirm that applicant (licensee/applicant) is solely a debt purchaser and pursuant to Rule 3.01(4) is not required to maintain the minimum liquid assets referred to in § 5-16-123(1)(a), C.R.S.					
Statements made herein are under oath. False statements may be pur perjury.	nishable as second-degree				
Signature of officer, partner, or owner	Date				
Print name and title					

2 2/23/22

COLORADO COLLECTION AGENCY LICENSE BANK ACCOUNT INFORMATION

Collection Agency Name

Trust Acc	ounts
-----------	-------

Print name and title

	l your trust accounts below. For any out-of-sta ount Affidavit (next section). Attach additional		
Trust account Number:			
Name of Bank:			
Bank's address: (Street address)	(City)	(State)	(Zip code)
Bank's phone #:	Bank's fax # (if applicable):		
Person(s) authorized to write checks o	r responsible for this account:		
Operating Accounts			
Operating account(s) information:	List all your operating accounts below:		
Operating account #:			
Name of Bank:			
Bank's address:			
(Street address)	(City)	(State)	(Zip code)
Bank's phone #:	Bank's fax # (if applicable):		
Person(s) authorized to write checks of	or responsible for this account:		
accounts of applicant/licensee to the	the above-named banks/associations to relead Administrator of the Colorado Fair Debt Colle ath. False statements may be punishable as s	ction Practices a	ct at any time.
Signature of officer, partner, or owner	Date		

COLORADO COLLECTION AGENCY LICENSE OUT-OF-STATE TRUST ACCOUNT AFFIDAVIT

(Use only for out-of-state trust accounts)

	gal name of collection agency, referred to below as "affiant"), do hereby swear and affirm under penalty of jury that the following information is true and correct:					
1.	Affiant is licensed as a collection agency by the Administrator of the Colorado Fair Debt Collection Practices Act and/or is applying for a Colorado collection agency license.					
2.	Affiant maintains one or more trust accounts ("account") in a state(s) other than the State of Colorado. Provide the trust account number, name, address, and telephone number of the bank: (For each trust account - submit a separate affidavit).					
	Trust Account No:					
	Bank Name:					
	Bank Address:					
	Phone No:					
3.	The account is used for the benefit of affiant's clients located in the State of Colorado. The account may also be used for the benefit of affiant's other clients.					
4.	The funds maintained in the account contain, at all times, sufficient funds to pay all sums due and owing to all of affiant's clients.					
5.	The funds maintained in the account are used only for purposes of paying affiant's clients and the account is not used as an operating account.					
6.	. Affiant acknowledges that the account, although not maintained in a financial institution within the State of Colorado, may be attached upon order of a Colorado court and authorizes such attachment.					
7.	7. Corporations should include the signature of the President or other authorized official of the corporation. LLCs should include the signature of the managing member. Partners must sign individually or in accordance with the Partnership Agreement. Attach additional pages if necessary. Statements made herein are made under oath. False statements may be punishable as second-degree perjury.					
Sta	Statements made herein are under oath. False statements may be punishable as second-degree perjury.					
Sig	nature of officer, partner, or owner Date					
Pri	Print name and title					

COLORADO COLLECTION AGENCY LICENSE BRANCH LOCATION LIST

You must list any branch office that contacts Colorado residents or collects for clients with a place of business in Colorado. Do not include the principal place of business. Attach additional pages if necessary.

Legal name of collection agency:

Branch office address	Branch office phone number	
Statements made herein are under oath. False st	tatements may be punishable as second-degree perjury	
ignature of officer, partner, or owner	Date	
Print name and title		

COLORADO COLLECTION AGENCY LICENSE COLLECTOR AND SOLICITOR LIST

Provide a current list of the full names of all debt collectors, including aliases, and solicitors currently employed by the collection agency that will be contacting, collecting or attempting to collect debts from Colorado consumers or will be soliciting accounts from creditors with a place of business located in Colorado. Debt collectors may use one alias consisting of both a first and last name but may not use the same alias. Attach additional pages if necessary.

Legal name of collection agency:					
Debt collectors (include alias if applicable)	Solicitors				
Statements made herein are under oath. False statement	ts may be punishable as second-degree perjury.				
Signature of officer, partner, or owner	Date				
Print name and title					

COLORADO FAIR DEBT COLLECTION PRACTICES ACT LICENSE VERIFICATION FORM

Applicant: Complete the top of this form and mail it to all jurisdictions where licensed as a collection agency, debt collector, payday lender or other financial services provider. Copy the form and use as needed.

Regulator: Please complete the bottom part of this form and send it to us at:

Colorado Department of Law
Consumer Credit Unit
Ralph L. Carr Colorado Judicial Center
1300 Broadway, 6th Floor
Denver, CO 80203
car@coag.gov

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Name of person completing this form:							
Title:		9	State:		Date:		
Phone Number:							

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