# COLORADO DEPARTMENT OF LAW CONSUMER CREDIT UNIT COLLECTION AGENCY LICENSE LICENSE VERIFICATION FORM

### **Collection Agency Applicant Instructions**

Download this document. Use the fillable fields to complete Section 1 of this Verification form and save to your computer. Send both pages of the form to any state where you hold a license as a collection agency, debt collector, payday lender, or other financial services provider. Please provide us with a copy of each form you sent, so we may track receipt of the completed forms.

### **State Regulator Instructions**

Complete Section 2 of this Verification form and send to our office:

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

## **Section 1 for Collection Agency Applicant**

State licensed:	Type of License:	
Licensee Name (name of company or person licensed):		
DBA Names:		
Names of senior owners, officers, members, partners, or trustees:		
License Number:	Original issue date:	

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# **Section 2 for State Regulator**

Is the company or person in Section 1 licensed/	regulated by your agency?
Yes No	
Is the information provided accurate?	
Yes No	
Have you examined the company or person for	compliance of state laws?
Yes No	
Are there any significant, unresolved examination	n issues?
Yes No	
Are there any significant, unresolved complaints	against the company or person?
Yes No	
Has this agency taken any disciplinary, administ or person?	rative, or legal action(s) against the company
Yes No	
Are there any pending or contemplated disciplin the company or person?	ary, administrative, or legal action(s) against
Yes No	
Please attach additional pages, as needed, to plinformation (above).	rovide further information regarding any of the
State and Agency:	
Name and title of person completing this form:	
Phone number:	

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