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**STATE OF COLORADO
 DEPARTMENT OF LAW**

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 Denver, Colorado 80203
 Phone (720) 508-6020
**Consumer Protection Section
 Consumer Credit Unit**

NOTICE OF ADDRESS CHANGE FORM

Licensed collection agencies should use this form to report any changes to their business address or local Colorado office. Failure to notify the Administrator within thirty days of such address change shall result in the automatic expiration of the collection agency license. [5-16-122(1), C.R.S., & Rule 1.07, Rules of the Administrator]		
COLLECTION AGENCY'S LEGAL NAME:	LICENSE #:	PERSON TO CONTACT REGARDING THIS CHANGE: NAME: _____ PHONE #: _____ EMAIL: _____
THIS CHANGE APPLIES TO: <input type="checkbox"/> Business Address <input type="checkbox"/> Change applies to physical and mailing address <input type="checkbox"/> Change applies to physical address only <input type="checkbox"/> Local Colorado Office		
EFFECTIVE DATE OF CHANGE:		
OLD ADDRESS:	NEW ADDRESS:	
OLD TELEPHONE NUMBER:	NEW TELEPHONE NUMBER:	
Statements made herein are made under oath. False statements may be punishable as second-degree perjury.		
_____		_____
(Date)		(Signature)

(Print Name & Title)		
Mail the Completed Form to: Colorado Department of Law Consumer Credit Unit, CAR Ralph L. Carr Colorado Judicial Center 1300 Broadway, 6th Floor Denver, CO 80203		