

**N J DEPARTMENT OF BANKING AND INSURANCE
 LICENSING SERVICES BUREAU
 P O BOX 473
 TRENTON, NJ 08625**

BRANCH OFFICE INSTRUCTIONS

1. Indicate the type of branch license being requested in the space provided.
2. Type or print clearly all answers. Do not leave any questions unanswered. If a question is not applicable or the answer is none, please type or print N/A or NONE.
3. Insert on line #1, the complete name of the corporation, limited liability company, partnership, or sole proprietorship exactly as it appears in your incorporation/formation papers as filed with the N J Division of Revenue or on your trade name certificate filed with your County Clerk's office.
4. Application must be properly signed and dated. Signatures must be witnessed by a notary public or attorney.
5. Send a company check or money order made payable to: **Treasurer, State of New Jersey.** The check must be in the amount listed in the schedule below for the license type selected on the application. Personal checks are not accepted.

<u>LICENSE TYPE</u>	<u>NON-REFUNDABLE FEE</u>
Motor Vehicle Installment Seller	\$300.00
Home Repair Contractor	\$300.00
Home Finance Agency	\$400.00
Pawnbroker	\$500.00
Check Casher	\$700.00
Insurance Premium Finance Company	\$500.00
Non-Profit Debt Adjuster	\$300.00

NOTE: All fees submitted with an application are NON-REFUNDABLE.

Questions regarding an application may be directed to (609) 292-7272 – follow the prompts and select option #3, then select option #2, and then select option #1 to be connected to Banking Licensing.

Send to:

Licensing Services Bureau
 Dept. of Banking & Insurance
 P.O. Box 473
 Trenton, NJ 08625

For Overnight delivery:

Licensing Services Bureau:
 Dept. of Banking & Insurance
 20 W. State St. – 8th Floor
 Trenton, NJ 08608

SPECIAL INSTRUCTIONS TO THE PAWNBROKER BRANCH APPLICANT

In addition to following the General Instructions, you must submit:

1. An executed surety bond demonstrating coverage in the amount of \$1,000 per location. A blank form is included in the application materials.
2. A copy of your insurance policy showing additional liability and fire insurance coverage to cover any pledge at the branch location in the event of loss by fire, theft, burglary or otherwise insurance. Attach a copy of the insurance policy.

Questions concerning this application should be directed to Licensing Services Bureau at (609) 292-7272 (follow menu prompts and select #3, then select #2, then select #1 to be connected to Banking Licensing staff.

APPLICATION MUST BE COMPLETE UPON SUBMISSION OR IT WILL BE RETURNED.

DEPARTMENT USE ONLY:			
Ref No.	Rel No.	C/R No.	Date Proc.

STATE OF NEW JERSEY
DEPARTMENT OF BANKING and INSURANCE
LICENSING SERVICES BUREAU
PO Box 473
Trenton, NJ 08625

BRANCH APPLICATION

INDICATE TYPE OF LICENSE:		
Motor Vehicle Installment Seller	Home Repair Contractor	Pawnbroker
Check Casher		

TYPE OR PRINT CLEARLY

- 1. Name of Applicant: _____
D/B/A or Trade Name (if applicable) _____
- 2. Principal address as it appears on license: _____
_____ Reference No. _____
- 3. Address of branch office to be licensed(include, city, state, county & zip code) _____

CERTIFICATION

I, the applicant, being duly sworn according to law depose and say that the answers set forth are true to the best of my knowledge and belief. This application is made for the purpose of inducing the issuance of a banking license and I understand that any information withheld or which represents a material misstatement will constitute grounds for rejection of this application by the Commissioner of Banking and Insurance.

Signature of Corporate President, Partner, Sole Proprietor

Date

Subscribed and sworn to before me at _____

this _____ day of _____ 20____

(Official Title)

BOND

WHEREAS, application has been made to the Commissioner of Banking and Insurance of the State of New Jersey by

_____ (If an individual or a partnership, insert full name(s) and add after each name the words "residing in the city of

_____ in the County of....., in the State of....." and then add, if applicable, the words "trading

_____ under the name of..... or if a corporation, insert name, and add the words "a corporation of the

_____ State of..... having its principal office in the city of in the County of)

_____ in the State of New Jersey for a license to engage in business pursuant to the provisions of N.J.S.A. 45:22 -1 et seq. known

_____ as the "New Jersey Pawnbroker Law" in the city of _____ in the County of

_____ in said State and

WHEREAS, said applicant is/are required by said Law to execute a bond to the said State of New Jersey in the penal sum of One Thousand Dollars, and file the same with said Commissioner; Now therefore,

KNOW ALL MEN BY THESE PRESENTS, that _____

(Name of Licensee)

as a principal, and _____ of the City of _____,

(Name of Surety Company)

County of _____, State of _____ as surety, are held and firmly bound unto the State of New Jersey for the use of the State and of any other person who may have a course of actin against the principal herein named as licensee under the provisions of the New Jersey Pawnbroker Law aforesaid in the penal sum of **\$1,000.00** to be paid unto the State of New Jersey for the uses aforesaid, in, which payment well and truly to be made, we bind ourselves, and each of our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents. This bond shall become effective _____, 20_____, and shall terminate December 31, 20_____.

Sealed with our seals, dated the _____ day of _____, 20_____.

THE CONDITIONS OF THIS OBLIGATION are such that if the above bounden

_____ SHALL INDEMNIFY AND SAVE HARMLESS the State of New Jersey and any other person who may have a cause of action against the above bounden _____ as licensee under the provisions of the New Jersey Pawnbroker Law aforesaid then this obligation to be void and otherwise to remain in full force and virtue.

Signed, sealed and delivered in the presence of

_____ (Name of Licensee)

(Seal, if Corporation)

_____ (.....President, if Corporation)

Attest: _____

(.....Secretary, if Corporation)

(Witness, if Sole Proprietor or Partnership)

_____ (Sole Proprietor or Partner or Member)

_____ (Surety Company)

By: _____ (Attorney in fact)