



TN DEPARTMENT OF FINANCIAL INSTITUTIONS
414 UNION STREET, SUITE 1000
NASHVILLE, TENNESSEE 37219
(615) 741-2236 FAX (615) 741-2883

MEMORANDUM

TO: ALL INDUSTRIAL LOAN & THRIFT REGISTRANTS

FROM: Compliance Division

DATE: April, 2009

RE: **RENEWAL OF CERTIFICATE OF REGISTRATION**

Your present Certificate of Registration, which authorizes you to conduct business as an Industrial Loan & Thrift Company, expires June 30, 2009. Please complete and return the enclosed Annual Inspection Fee and Registration Fee Form and include a check for **\$325 for each licensed location.** (Checks should be made out to Department of Financial Institutions.)

Note: Please attach a list of all license numbers for all licensed locations and include \$325 for each licensed location.

This license must be renewed on or before June 1, 2009. However, to allow for processing of your renewal, we strongly encourage each registrant to submit their renewal on or before May 15, 2009.

RENEWAL REQUIREMENTS:

1. To satisfy the capital requirement of T.C.A. § 45-5-201, you must attach a copy of a balance sheet as of December 31, 2008 (or later) and a statement of income and expenses.
2. One of the following three items must be attached:
 - A continuation certificate for your current bond extending the expiration date to June 30, 2010,
 - A new bond to replace the current bond with an expiration date of June 30, 2010,or
 - A letter of credit with an expiration date of June 30, 2012.

Failure to provide required information may result in the denial of your registration. If you have any questions regarding the above matters, please contact our office at (615) 741-3186.

\$325.00 FEE



STATE OF TENNESSEE
DEPARTMENT OF FINANCIAL INSTITUTIONS
SUITE 1000
414 UNION STREET
NASHVILLE, TN 37219
PHONE (615) 741-2236 FAX (615) 741-2883

**ANNUAL INSPECTION FEE AND REGISTRATION FEE
FOR INDUSTRIAL LOAN AND THRIFT COMPANIES**

To the Commissioner of Financial Institutions: _____
Name, address and daytime telephone number of contact person

I, _____
Name and Title of Officer

Name & Address of Home Office

hereby certify upon oath that the said corporation, partnership, or individual, in payment of the Annual Inspection Fee and Registration Fee will lawfully and fairly operate as an industrial loan and thrift company in Tennessee at the following locations:

Name of Company or Branch Address Zip Code

Federal Tax Identification # _____

Identify all parties owning over 5% interest in the applicant. (If a partnership, list each partner and their interest.)

Has any stockholder, officer or employee ever been convicted of a felony?
Yes _____ No _____ If yes, explain fully on a separate sheet.

No. Employees _____ No. Accounts _____ Accounts Rec. \$ _____

I certify that the tangible net worth of each office or place of business does now and will continue to exceed the \$25,000.00 minimum requirement of T.C.A. Section 45-5-201.

ATTACH CURRENT ANNUAL FINANCIAL STATEMENT (BALANCE SHEET AND STATEMENT OF INCOME AND EXPENSES AT A MINIMUM)

The sum of \$325.00 for the above named company in payment in fees required by T.C.A. Section 45-5-203 as amended, for the fiscal year July 1, _____ through June 30, _____ is hereby tendered.

Subscribed and sworn to before me on
This _____ day of _____, _____.

Witness my signature on this _____ day
_____, _____.

Signature of Officer, Partner, or Proprietor

My Commission expires: _____

Notary Public

MAKE CHECK PAYABLE TO THE DEPARTMENT OF FINANCIAL INSTITUTIONS

NAME AND ADDRESS OF APPLICANT:

NAME OF BUSINESS

STREET ADDRESS CITY COUNTY STATE ZIP CODE

FEDERAL TAXPAYER ID NUMBER STATE WHERE ORGANIZED

TELEPHONE NUMBER FAX NUMBER EMAIL ADDRESS

HOME (MAIN) OFFICE: (LAST NAME, ADDRESS, TELEPHONE NUMBER)

ATTACH LIST OF OTHER OFFICE LOCATIONS AND IDENTIFY BY NAME AND ADDRESS ANY AFFILIATES DOING BUSINESS IN THE STATE OF TENNESSEE. IF NONE, SO STATE.

STATUS OF APPLICANT (Check appropriate box)

- An individual doing business under own name
SSN _____
Home Address _____
- An individual doing business under assumed or trade name
SSN _____
Home Address _____
- General Partnership
- Limited Partnership
- Limited Liability Company
- A corporation organized in TN
- A corporation organized in some other jurisdiction
- Other

Is applicant affiliated with any bank or bank holding company? If yes, identify by name and address:

Is applicant affiliated with any other lending institution or company? If yes, identify by names and addresses:

TYPE OF LENDING PERFORMED (check all that apply):

- Unsecured
- Secured Collateral:
 - Personal Property*
 - Real Property*
- Endorsement Company (Broker)
- Installment Sales Contracts