

State of Nevada
Department of Business and Industry
Nevada Consumer Affairs Unit

APPLICATION FOR REGISTRATION
(Structured Settlement Purchase Company)

Required Items – Checklist: PLEASE CHECK ✓ EACH BOX THAT APPLIES

- Complete Application
- \$50,000 surety bond or letter of credit made payable to the State of Nevada
- Sworn Certificate
- If the applicant is an individual, the Child Support Statement
- Copy of Nevada Business License or Authorization to do business as a foreign entity
- Copy of the organization's Certificate of Good Standing
- \$250 non-refundable Initial Application and Fee
- \$250 non-refundable Renewal Fee (Timely)
- \$375 non-refundable Renewal Fee (within 60 days after expiration)
- \$500 non-refundable Reinstatement Application Fee (more than 60 days after expiration)

MAIL FORMS TO: Nevada State Business Center, 3300 W. Sahara Ave., Suite 425, Las Vegas, Nevada 89102 - Telephone (702) 486-2750 - Fax (702) 486-2758
Carson City: 1830 College Parkway, Suite 100, Carson City, Nevada 89706 - Telephone (775) 684-1910 - Fax (775) 684-2998
www.consumeraffairs.nv.gov email: register@business.nv.gov

APPLICATION FOR REGISTRATION

(Structured Settlement Purchase Company)

Mail or hand-deliver to Nevada Consumer Affairs' Las Vegas office.

The State of Nevada's Structured Settlement Protection Act, structured settlement purchase companies ("SSPC") doing business in the State of Nevada must register with the Consumer Affairs Unit of the Department of Business and Industry. The registration requirements are set forth in NRS 42.200 to 42.400 and include obtaining a surety bond or letter of credit in the amount of \$50,000.

Pursuant to NRS 42.200 et seq. the undersigned hereby makes application to the Nevada Consumer Affairs Unit for registration as structured settlement purchase company.

Name of Applicant and DBA if applicable: _____

Address of Applicant: _____

Street Address City State Zip

Telephone No.: _____ Fax No.: _____

E-Mail: _____ Taxpayer Identification # or Social Security #: _____
(Mandatory) (If applicant is a Natural Person provide Social Security #)

State of Organization (attach Certificate of Good Standing): _____

Nevada Business License # or Foreign Entity Qualification: _____
(Attach a copy of the license or qualification)

Name of Member Owner Officer Director or Manager submitting application: _____

Telephone No.: _____ E-Mail: _____
(Mandatory)

Fax No: _____

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Registration must be renewed by the registrant on or before the renewal date for additional one-year periods

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1. Please complete the following for all owners of the structured settlement purchase company:

Name	Address	Telephone No.	Social Security No. or EIN	Percentage of Interest Held (Must Equal 100%)

2. List names of officers, directors, managers, or members:

Date of Hire	First Name	Last Name

3. Each SSPC must post a \$50,000 Surety Bond or Letter of Credit (“LOC”). Provide the following:

Surety Bond # _____ Amount of Bond \$ _____ Beneficiary: State of NV

Name and address of the corporate surety issuing the bond: _____

Letter of Credit # _____ Amount \$ _____ Beneficiary: State of NV

Issuing Bank: _____
Name Address

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4. The applicant designates the following natural person as its resident agent for service of legal process in the State of Nevada.

Name of Resident Agent: _____

Address of Resident Agent: _____
Street Address City State Zip

Resident Agent's Telephone No.: _____ Resident Agent's Fax No.: _____

Resident Agent's E-Mail: _____

The SSPC applicant acknowledges that it will continuously maintain a resident agent in the State of Nevada for service of legal process.

I, the undersigned, certify that I am authorized to sign the within Application for Registration on behalf of the applicant named herein; that I have read and signed the Application for Registration and know the contents thereof and that the statements made herein are true and correct. By signing below, I represent that I have personally completed this Application for Registration (Structured Settlement Purchase Company) and verified the information contained herein.

I acknowledge that all fees paid to the Nevada Consumer Affairs Unit of the Department of Business and Industry in connection with this application for registration are non-refundable.

Name of Applicant: _____

By: _____
(Authorized Signatory) / (Owner)

Printed Name: _____

Date: _____

Subscribed and sworn to before me on the _____ day of _____, 20 _____

by _____
(Name of person making statement)

Notary public in and for the County of _____, State of _____

My commission expires _____

Notary Signature _____

Notary Seal

SWORN CERTIFICATE

(Owner, Officer, Director, Member or Manager of Applicant)

State of

County of.....

The undersigned applicant or authorized representative of the applicant swears or affirms that the applicant has secured a surety bond or has been issued a letter of credit in the amount of \$50,000 (Security) and that the Security:

___ is executed by a corporate surety licensed to do business in this State;

___ is made payable to the state of Nevada;

___ is effective concurrently with the registration of the applicant and remain in effect for not less than three years after the expiration or termination of the registration.

___ will be renewed each year as needed to keep it continuously in effect when the registration of the applicant is renewed unless the applicant obtains alternative security which complies with all applicable provisions regarding Security posted by structured settlement purchase companies;

___ ensures the structured settlement purchase company's compliance with Nevada's Structured Settlement Protection Act;

___ provides a source of recovery for a payee if the payee obtains a judgment against the structured settlement purchase company for a violation of the Structured Settlement Protection Act;

___ cannot be cancelled or modified during the term for which it is issued unless the surety or the structured settlement purchase company provides written notice to the Unit at least 20 days prior to the effective date of the cancellation or modification; and

___ provides that the liability of the surety must not be affected by: (i) any breach of contract, breach of warranty, failure to pay a premium or other act or omission of the structured settlement purchase company; or (ii) the insolvency or bankruptcy of the structured settlement purchase company.

Date: _____

Signature

Print Name

Title

Signed and sworn to (or affirmed) before me on _____

by _____

.....

(Signature of notarial officer)

(Seal, if any)