



STATE OF MAINE
 DEPARTMENT OF PROFESSIONAL
 AND FINANCIAL REGULATION
 BUREAU OF CONSUMER CREDIT PROTECTION
 35 STATE HOUSE STATION
 AUGUSTA, MAINE
 04333-0035

Paul R. LePage
 Governor

William N. Lund
 Superintendent

Name Change and/or Address Change Request Form

Please complete this form and return it to the Bureau of Consumer Credit Protection with the required supporting documentation and your payment of \$25.

Please provide:

- A signed letter on company letterhead stating:
 - the previous company name and/or address;
 - the new company name and/or address; and
 - the date the change became or will become effective

- Your original registration or license certificate. The Bureau will issue a new certificate once the name and/or address change has been approved and processed.

- An original bond rider amendment reflecting the change, if applicable. Copies cannot be accepted.

- For a name change: proof that you have the necessary form with the Maine Secretary of State to conduct business under the new name.

- \$25 administrative fee:
 - Checks are to be made payable to "Treasurer, State of Maine"
 - Payment may also be made by credit card. To download the form:
 - Go to www.maine.credit.gov
 - Click "Apply for a professional license"
 - Under your business category, click "Licensing/Registration Information"
 - Under forms and applications, click "Authorization of Credit Card Payment"

- List the name and phone number of contact person(s) for:
 - Compliance Examinations _____
 - Consumer Complaints _____

Company representative preparing this request:

Signature: _____

Name (printed) and Title: _____

E-mail address: _____

Telephone number: _____ Fax number: _____

Date: _____