



TEXAS OFFICE OF CONSUMER  
CREDIT COMMISSIONER

2601 N Lamar Blvd  
Austin, TX 78705  
Phone: 512.936.7600  
Fax: 512.936.7610  
licensing@occc.texas.gov

## Application Fee Worksheet Debt Management and Debt Settlement Service Provider Registration

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Payment must be in the form of a check or money order. Cash payments will not be accepted. Make check or money order payable to Office of Consumer Credit Commissioner.

**New Licenses:**

Flat fee for investigation:	x	=
Assessment for registration sought:	x	=

**Total Amount Due:**



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### APPLICATION QUESTIONNAIRE FOR DEBT MANAGEMENT SERVICES PROVIDER

1. Has applicant or any affiliate operated a debt management business in Texas or any other state?  Yes  No  
(If yes, describe below.) Note: text size will become smaller as needed and multiple lines created.

2. Does applicant currently operate debt management business in states other than Texas?  Yes  No  
(If yes, list all states in which applicant currently operates and any registrations or licenses held.)

3. Has the applicant or any principal of the applicant been convicted of any crime or found liable for any civil violation of laws involving moral turpitude? (If yes, explain below.)  Yes  No

4. Does the applicant or any principal of the applicant have any pending or completed judgments, tax liens, litigation or administrative actions by any government agency? (If no, explain below.)  Yes  No

5. Has the applicant's registration or license to provide debt management services in this state or any other state previously been revoked or suspended? (If yes, explain below.)  Yes  No

6. Does the applicant have any accreditation that includes a requirement that the provider comply with industry standards by a nationally recognized accrediting organization? (If yes, explain below.)  Yes  No

7. Does the applicant maintain a trust account for the management of all money paid by or on behalf of a consumer for disbursement to the consumer's creditor? (If no, explain below.)  Yes  No

8. Describe the applicant's business operation plan below. Note: text size will become smaller as needed and multiple lines created.

The Office of Consumer Credit Commissioner obtains information from this form and certain third party sources. With few exceptions, you may review and correct the information we collect. To find out more about the information we collect or to make an open records request, contact our Public Information Officer at 512-936-7622 or [info@occc.texas.gov](mailto:info@occc.texas.gov).



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### LIST OF ADDITIONAL OFFICE(S) OR DBA'S FOR A DEBT MANAGEMENT SERVICE PROVIDER

This form is only to be filed with your initial registration for a debt management service provider registrant.

**Applicant:** \_\_\_\_\_

DBA (Operating name) \_\_\_\_\_

Physical address (No P.O. Boxes) \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

Mailing address (if different from above) \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Individual responsible for daily operations at this location \_\_\_\_\_

DBA (Operating name) \_\_\_\_\_

Physical address (No P.O. Boxes) \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

Mailing address (if different from above) \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Individual responsible for daily operations at this location \_\_\_\_\_

DBA (Operating name) \_\_\_\_\_

Physical address (No P.O. Boxes) \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

Mailing address (if different from above) \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Individual responsible for daily operations at this location \_\_\_\_\_

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# Appointment of Statutory Agent and Consent to Service

The address provided for the statutory (registered) agency MUST be an address within the state of Texas. If the statutory (registered) agent is a natural person, the physical address provided for that individual must be different than that of the licensed location.

Entity Name or Name of Owner/Sole Proprietor \_\_\_\_\_

Operating Name (d/b/a) \_\_\_\_\_

The undersigned, being an applicant for or a holder of a:

- Regulated Loan License under the provisions of TEX. FIN. CODE Section 342.001, *et. seq.*
- Pawnshop License under the provisions of TEX. FIN. CODE Section 371.001, *et. seq.*
- Property Tax Loan License under the provisions of TEX. FIN. CODE Section 351.001, *et. seq.*
- Motor Vehicle Sales Finance License under the provisions of TEX. FIN. CODE Section 348.001, *et. seq.*
- Credit Access Business License under the provisions of TEX. FIN. Code Section 393.001, *et. seq.*
- Commercial Motor Vehicle License under the provisions of TEX. FIN. Code Section 353.001, *et. seq.*
- Debt Management Registration under the provisions of TEX. FIN. Code Section 394.001, *et. seq.*

does hereby appoint the following agent upon whom may be served all judicial and other process or legal notice directed to this applicant.

Name of Agent \_\_\_\_\_

who is a resident of the State of Texas and the County of \_\_\_\_\_ at \_\_\_\_\_

Agent Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Texas

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

In case of the agent's death, disqualification, legal disability, or removal from the state, service of all judicial and other process of legal notice may be made upon the Consumer Credit Commissioner, State of Texas.

Signature of Owner, Officer, or Director \_\_\_\_\_

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

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SURETY BOND

(Consumer Debt Management Services)

Bond No. \_\_\_\_\_

KNOW ALL PERSONS BY THESE PRESENTS THAT WE, the undersigned, \_\_\_\_\_, as Principal, and \_\_\_\_\_, as Surety, are held and firmly bound unto the Office of Consumer Credit Commissioner of the State of Texas (the "Commissioner"), as obligee, in the sum of \_\_\_\_\_ AND \_\_\_\_\_ ONE-HUNDREDTHS UNITED STATES DOLLARS (U.S. \$ \_\_\_\_\_) for the use of the Commissioner and any other person or persons who may have a claim against the aforesaid Principal arising out of or relating to the activities of said Principal as a Consumer Debt Management Services provider registered by the Commissioner under the Texas Finance Code Chapter 394.201 et.seq., for the payment of which, well and truly to be made, the undersigned Principal and Surety, jointly and severally bind themselves and their successors, executors, heirs, administrators, and assigns by these presents.

WHEREAS, the undersigned principal has applied to the Commissioner for a registration as a Consumer Debt Management Services provider as defined and set forth in the Act, and

WHEREAS, this Bond is being provided to satisfy the financial requirements set forth in Section 394.206 of the Act.

NOW, THEREFORE, the conditions of the obligation evidenced by this Bond are as follows:

1. This Bond is to provide financial surety for the discharge by the Principal of any and all monetary obligations to the Commissioner or the Office of Consumer Credit Commissioner or any person to whom an obligation of the Principal arises by virtue of any and all acts or omissions arising under or relating to the Texas Finance Code Chapter 394.201 et.seq., or any regulations, rules, or orders issued or promulgated pursuant thereto.
2. If the Principal shall duly and fully comply at all times with and timely discharge all obligations arising under the Texas Finance Code Chapter 394.201 et.seq., or any such regulations, rules, and orders, then the Surety shall have no monetary obligation hereunder.
3. This Bond shall remain in effect for the entire term of the registration in connection with which it is being issued, unless revoked by thirty (30) or more days written notice to the Commissioner. Revocation hereof shall not alter or reduce the liability of the Surety for any claims relating to or arising out of facts and circumstances that occurred prior to the effective date of revocation.
4. This Bond shall automatically renew for any succeeding renewals of the registration in connection with which it is being issued without need of any action or notice by any party, provided, however, that the Surety may, by written notice at least thirty (30) days prior to the end of such term, advise the Commissioner in writing that this Bond will not be renewed.
5. The aggregate liability of the Surety hereunder is limited to U.S. \$ \_\_\_\_\_. Any person or party making a claims or claims under this Bond may make such claim or claims in amounts less than the full amount of this bond, and multiple claims are permitted, provided that the aggregate liability of the Surety hereunder does not exceed U. S. \$ \_\_\_\_\_.
6. This Bond is effective the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

IN WITNESS WHEREOF, the undersigned have executed this Bond this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**SURETY PRINCIPAL**

Printed name \_\_\_\_\_

Printed name \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_