

**Texas Department of Banking
Private Child Support Enforcement Agency
Application for Initial Registration**

Before completing this application for registration, we ask that you read Chapter 396 of the Texas Finance Code and 7 TAC Chapter 31.

Responses to all questions must be provided. Indicate if the answer is “None” or “Not Applicable.”

Section I. Principal and Other Locations

1. Full legal name of the applicant:

2. Trade name or assumed name of the applicant, if applicable, including proof of registration:

Provide proof of registration of the trade or assumed name from the Secretary of State and the Clerk of Court’s Offices in the Counties where the applicant proposes to do business as a corporation, limited liability company, or partnership or provide proof of registration from the Clerk of Court’s Office in the County where the applicant proposes to do business as a sole-proprietorship.

3. Principal business location: (If the applicant has a location in Texas, the Texas location must be listed as the principal business location. A Texas address is required unless the applicant is a foreign agency.)

Street address, city, state, and zip code

4. Does the applicant operate at more than one location?
o Yes o No

If yes, attach a separate list including the address, business telephone number, fax number, web site, and E-mail address of each location.

**The following are considered locations of the applicant:
any location where records are maintained; any location where child support payments are received or processed; any location where the applicant conducts activities in collecting child support obligations; any location where appointments are conducted with obligees; or any location where contracts are executed by obligees. Refer to 7 TAC 31.1(19)(B) for an exclusion.**

5. Mailing address, if different from principal business location:

All certificates will be mailed to the mailing address provided here.

6. The person responsible for questions about:

This Application: _____

Name and Title

Business Telephone Number and Fax Number

E-mail address

Complaints:

Name and Title

Business Telephone Number and Fax Number

E-mail address

7. Web site address of the applicant: _____

Section II. Owners, officers and directors

1. Provide the following information for **each principal owner** (persons owning or controlling 10% or more of the agency), **officer, and director, if applicable**. (If additional space is needed, attach a separate sheet.)

Name: _____

Title: _____

Percentage of ownership interest: _____

Physical business address: _____

Mailing address: _____

Business telephone number: _____

Fax number: _____

Web site address: _____

E-mail address: _____

Name: _____

Title: _____

Percentage of ownership interest: _____

Physical business address: _____

Mailing address: _____

Business telephone number: _____

Fax number: _____

Web site address: _____

E-mail address: _____

Name: _____
Title: _____
Percentage of ownership interest: _____
Physical business address: _____
Mailing address: _____
Business telephone number: _____
Fax number: _____
Web site address: _____
E-mail address: _____

2. Is the stock ownership subject to a voting trust or a buy/sell agreement?
 Yes No N/A

If yes, explain:

Section III. Nature of business and required information

- Type of business: Sole-proprietorship
 Corporation, including Limited Liability Companies
 Partnership or Joint Venture
 Other, describe _____

SOLE-PROPRIETORSHIPS

If your company is a **sole-proprietorship**, provide the following:

- certified financial statements for the most recent fiscal year including a balance sheet, and income statement, which reflect the financial condition of the owner **and** the business. (Sample forms are enclosed for the certification and financial statements. **You do not have to complete the “CASH FLOW STATEMENT.”**) **Contact your accountant or bookkeeper for assistance.**
- if the most recent fiscal year ended more than 120 days prior to submission of this application, provide an interim version of each statement required and listed above for the period from the end of the most recent fiscal year to a date less than 120 days prior to submission. **These financial statements are required in addition to the fiscal year end information.**
- a written certification by the **principal owner or accountant** that the financial information is a true and correct statement of the applicant’s financial position.
- Proceed to Section IV.

CORPORATIONS OR LIMITED LIABILITY COMPANIES

If your company is a **corporation or limited liability company**, provide the following:

- ❑ a certificate of account status from the Texas Comptroller of Public Accounts.
- ❑ proof of registration with the Texas Secretary of State, regardless of whether the applicant is a foreign or domestic corporation.
- ❑ certified financial statements (consolidated and unconsolidated for corporations with subsidiaries) for the most recent fiscal year including a balance sheet, and income statement. (Sample forms are enclosed for the certification and financial statements. **You do not have to complete the “CASH FLOW STATEMENT.”**) **Contact your accountant or bookkeeper for assistance. Audited, reviewed, or compiled financial statements will suffice in lieu of completing the form provided with this application.**
- ❑ if the most recent fiscal year ended more than 120 days prior to submission of this application, provide an interim version of each statement required and listed above for the period from the end of the most recent fiscal year to a date less than 120 days prior to submission. **These financial statements are required in addition to the fiscal year end information.**
- ❑ a written certification by the applicant’s **chief financial officer or accountant** that the financial information is a true and correct reflection of the applicant’s financial position.
- ❑ Proceed to Section IV.

PARTNERSHIPS

If your company is a **partnership**, provide the following:

- ❑ separate certified financial statements for the most recent fiscal year including a balance sheet and income statement, which reflect the financial condition of each partner **and** the business as a whole. (Sample forms are enclosed for the certification and financial statements. **You do not have to complete the “CASH FLOW STATEMENT.”**) **Contact your accountant or bookkeeper for assistance.**
- ❑ proof of registration with the Texas Secretary of State’s office, if a limited partnership.
- ❑ if the most recent fiscal year ended more than 120 days prior to submission of this application, provide an interim version of each statement required and listed above for the period from the end of the most recent fiscal year to a date less than 120 days prior to submission. **These financial statements are required in addition to the fiscal year end information.**

- written certifications by the **partners, personally and on behalf of the partnership, or their accountant** that the financial statements are true and correct reflections of the applicant and each partner's financial position.
- Proceed to Section IV.

Section IV. Licenses or certificates issued by other states

1. Has the applicant, the principal owner, an officer, director, or person owning or controlling more than 10% of the applicant maintained or obtained a license registration or certificate issued by another state to engage in collection activities?
 Yes No

If yes, provide a list containing the name(s) of the state agency, the primary regulatory contact person's name, address, telephone number, email address, license or certificate number, issue date, and current status of the license.

2. Has a state or other governmental agency ever denied, initiated any enforcement action (For example: Cease and Desist Order; Memorandum of Understanding; or Consent Agreement) revoked or suspended a license registration or certificate held by the applicant, the principal owner, an officer, director or person owning or controlling more than 10% of the applicant?
 Yes No

If yes, provide the name(s) of the state or other governmental agency, telephone number, and license or certificate number below. Additionally, provide a full explanation of the denial, enforcement action, revocation, or suspension. Provide a copy of the findings from any supervisory enforcement actions for the previous five years.

Section V. Litigation

- Provide a list containing information on each pending lawsuit, civil or criminal, involving the **applicant** including the following: the parties involved; a synopsis of the facts alleged by each party; the nature of the action; the court in which the lawsuit is pending; and the amount in controversy. Do not include lawsuits filed on behalf of clients.
- Provide a list containing information on each pending lawsuit, civil or criminal, involving an **owner of a controlling interest of the applicant** that is related to child support enforcement or may affect the applicant including the following: the parties involved; a synopsis of the facts alleged by each party; the nature of the action; the court in which the lawsuit is pending; and the amount in controversy. Do not include lawsuits filed on behalf of clients.

- Provide a list for the past ten years of each judgment awarded against the **applicant or any owner of a controlling interest of the applicant** and a statement as to whether an appeal is pending.

Section VI. Surety Bond

- Provide the **original** of the \$50,000 surety bond on the surety bond form included with this application. Contact your insurance agent for assistance. The bonding company and the insurance agency must be authorized to operate in the state of Texas through the Department of Insurance. Additionally, the content of the bond form is under the direct authority of the Department of Insurance. Any changes made to bond form must be approved by the Department of Insurance directly with proof of their approval of the same.
- Provide the following contact information:

Name of Insurance Agent

Name of Insurance Company

Address of Insurance Company (City, State, and Zip Code)

Business Telephone Number and Fax Number

E-mail address

Name of Contact at Surety Bonding Company

Name of Surety Bonding Company

Address of Insurance Company (City, State, and Zip Code)

Business Telephone Number and Fax Number

E-mail address

- You may make a request to the Commissioner to deposit \$50,000 with a federally insured depository in this state. Refer to the Deposit in Lieu of Surety form.

Section VII Contracts with obligees

- Provide a hard copy of the contract that you intend to use and an electronic version in Word or WordPerfect on a three and a half-inch disk, CD, or by E-mail to corpapp@dob.texas.gov. A sample contract is provided by the Department. If you wish to utilize a different contract form, you may do so; however, you **must** also provide the scores utilizing the Flesch Reading ease test and the Flesch-Kincaid grade level score. Access the Help section of Word or WordPerfect for instructions. This information is available through Spelling and Grammar in the Tools section of Word and Spellcheck in WordPerfect.

NOTICE: The Department of Banking cannot guarantee the privacy of a contract or any other information submitted by E-mail because of the risk that an unintended recipient may intercept the transmission.

- If the proposed contract prepared by the applicant does not meet the plain language criteria of 7 TAC Chapter 31, provide a statement specifying the following: the reasonable efforts that the applicant made to draft the contract in clear language; the plain language techniques that were used in the drafting; and the reasons why the required readability level was not achieved.

Section VIII. Calculation and Submission of Fees

Example: An applicant that has a principal location and two other locations:

Principal Location – Location (A)	\$ 500.00
Location (B)	\$ 500.00
Location (C)	\$ 500.00
Annual Cost of Regulation for the First Year	<u>\$ 500.00</u>
Total	\$2,000.00

Submit a check made payable to the **Texas Department of Banking** for the filing fee and cost of regulation with the application and attachments to the following address:

**Texas Department of Banking
2601 North Lamar Blvd., Suite 300
Austin, TX 78705-4294**

Direct any questions to corpapp@dob.texas.gov.

Section IX. Confidential Information

- Provide the **residential** address and **residential** telephone number of the principal owner, **and** all directors, if applicable, on a separate page marked "Confidential."

Section X. Certification by Chief Executive Officer or principal owner

I hereby certify that I am authorized to file this application, and that all information submitted to the Commissioner in connection with this application, including the forms, schedules, exhibits, attachments, and any related correspondence, is true and correct, to the best of my knowledge. The Applicant is not indebted to any local, state, or federal government or political subdivision of the government for delinquent taxes, fines, penalties or fees. I further certify that the agency is able to meet its financial obligations as they become due and that all information necessary for the Commissioner to make an informed decision is contained herein. In addition, I agree to notify the Commissioner if the facts described in the filing materials change prior to the issuance of the license.

A person commits a felony offense if the person intentionally makes an untrue statement of material fact in this application.

_____ by _____
Applicant) (Signature)

(CORPORATE SEAL)

(Printed or Typed Name)

(Title)

STATE OF _____
COUNTY OR PARISH OF _____

On this _____ day of _____, 20____, before me, a Notary Public in and for said County, of said State, personally appeared:

_____ known to me to be the person named in, and who executed the foregoing form and made oath that the statements and representations set forth therein are true to the best of his/her knowledge and belief.

(SEAL)

(Notary Public)