

STATE OF NEW MEXICO  
REGULATION AND LICENSING DEPARTMENT  
FINANCIAL INSTITUTIONS DIVISION  
2550 Cerrillos Road, 3<sup>rd</sup> Floor, SFE, NM 87505  
P.O. BOX 25101, SFE, NM 87504-5101  
SANTA FE, NEW MEXICO 87504  
TELEPHONE: (505) 476-4885 FAX: (505) 476-4670



**Investigation/Application Fee: \$150.00**  
**If applicable Agent Fee: \$25.00 per agent**

Type or Print Legibly

**APPLICATION FOR LICENSE TO SELL NEGOTIABLE CHECKS, DRAFTS  
AND/OR MONEY ORDERS**

Application is hereby made for a license to sell negotiable checks, drafts and money orders regulated pursuant to Section 58-20-1 NMSA 1978.

1. **APPLICANT'S NAME** \_\_\_\_\_

Doing Business As (d/b/a) \_\_\_\_\_

2. Please indicate the **LEGAL ENTITY** status below:

Applicant is:

- \_\_\_\_\_ A NEW MEXICO CORPORATION – Date \_\_\_\_\_
- \_\_\_\_\_ A FOREIGN CORPORATION – Date \_\_\_\_\_ State \_\_\_\_\_
- \_\_\_\_\_ A PARTNERSHIP - provide full name, residence address and social security numbers for each individual.
- \_\_\_\_\_ A SOLE PROPRIETOR – provide full name, residence address and social security number.
- \_\_\_\_\_ A LIMITED LIABILITY COMPANY
- \_\_\_\_\_ OTHER please specify \_\_\_\_\_

3. **MAIL AND CONTACT** information:

Name of Contact Person: \_\_\_\_\_ Title \_\_\_\_\_

Business Address: \_\_\_\_\_  
Street City State Zip

Mailing Address: \_\_\_\_\_  
P.O. Box # City State Zip

(\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Telephone Number FAX Number E-mail Address

4. **DESCRIPTION OF BUSINESS** \_\_\_\_\_

---

5. **NAME AND ADDRESS OF BANK(S)** in which account(s) will be maintained:

---

---

6. **ATTACH AS EXHIBIT 1 - LETTER(S) OF RECOMMENDATION** from bank(s) with whom the applicant does business.

7. **ATTACH AS EXHIBIT 2 - A FINANCIAL STATEMENT OF APPLICANT** as of the last fiscal year-end for which an annual statement has been prepared and certified by a certified public accountant or registered public accountant, in accordance with generally accepted accounting practices. Statements dated in excess of 12 months will not be accepted.

8. **ATTACH AS EXHIBIT 3 - EVIDENCE OF COMPLIANCE WITH THE BONDING REQUIREMENTS OF THE ACT**, Section 58-20-1(D) NMSA 1978. Bonding requirements are ten thousand dollars (\$10,000) for the licensee and an additional five thousand dollars (\$5,000) for each location within the state at which negotiable instruments are issued or sold. Total bonding coverage is not to exceed two hundred thousand dollars (\$200,000) per licensee.

9. **ATTACH AS EXHIBIT 4 - A LIST OF AGENT'S NAMES** and their business addresses that will issue money orders in this state.

10. **REMIT AN INVESTIGATION FEE** in the amount of one hundred fifty dollars (\$150.00). If the license is granted, the investigation fee shall be applied to the license fee for the first year. The investigation fee is not subject to refund. If applicable, enclose an additional and separate license fee in the amount of twenty-five dollars (\$25.00) for each Agent's license for which application is made.

### VERIFICATION

The Applicant filing this Application, its exhibits and any other attachments and the person by whom it is executed, having read and understanding the contents thereof, hereby represents, that all information contained herein is true, current and complete, to the best of their knowledge and belief.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_.

\_\_\_\_\_  
Applicant's name (Please Print or type)

By: \_\_\_\_\_  
(Authorized Signature)

\_\_\_\_\_  
(Title)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

(NOTARY SEAL)

My Commission Expires: \_\_\_\_\_