



STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF MORTGAGE LENDING

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Carson City, NV 89706
(775) 684-7060 Fax (775) 684-7061
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MORTGAGE BROKER BUSINESS PLAN

All applicants are required to provide a general business plan indicating how they plan to conduct business and a description of the policies and procedures that the mortgage broker and its mortgage agents will follow to arrange, make and service loans.

Company ("Applicant") Legal Name: _____	
DBA if applicable: _____	
NMLS ID No.: _____	
Business Plan: Upload a business plan outlining the marketing strategy, product, target markets, and operating structure the applicant intends to employ.	
Policies & Procedures: Describe the written policies and procedures that the Applicant has in place to supervise its mortgage agents and oversee the operations of the Applicant.	
Nevada-Specific Mortgage Broker Activity Questions	
1. Will the Applicant make and/or fund loans from its own account? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please identify and describe the sources of funding (e.g., cash, corporate capital or warehouse lines of credit): _____ _____ _____	
2. Will the Applicant broker or assign loans to other persons? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, provide below the name and address of the three primary persons that you will broker loans to: (1) _____ (2) _____ (3) _____	
Private Investor Activity	
3. Will the Applicant broker loans to or solicit private investors to invest in or fund loans? Yes <input type="checkbox"/> No <input type="checkbox"/>	

If yes, attach a detailed description of how you will advertise or solicit private investors to invest in or fund loans and include a copy of an example of your investor solicitation(s) and all private investor disclosures you make:

NOTE: "Private Investor" is defined by NRS 645B.01305.

If yes, will the Applicant maintain trust accounts pursuant to NRS 645B.175?

Yes ☐ No ☐

If yes, in Section 10 of the Company Form (MU1), provide the requested information concerning each trust account.

Wholesale Lender Activity

4. Will the Applicant do either of the following in relation to a loan which will be secured by real property located in Nevada:

(a) Directly take or receive an application from a borrower?

Yes ☐ No ☐

(b) Directly negotiate any terms with a borrower?

Yes ☐ No ☐

If the Applicant's answer to either of the above is YES, the Applicant is required to obtain and maintain a license for an office location in Nevada. Below, provide the business address, license number, NMLS ID and name of the qualified employee of the Applicant's Nevada office location (if the application is pending, indicate "pending" for "license number").

Servicing Activity

5. Will the Applicant service loans it makes or arranges under its mortgage broker license?

Yes ☐ No ☐

If yes, attach a complete description of the Applicant's servicing business, including the computer software used for tracking client accounts; a copy of the Applicant's servicing policies and procedures, including quality control procedures; the person or firm responsible for quality control and their experience in quality control; sample "hello" and "goodbye" letters; and the person who will be responsible for the Nevada portfolio of loans detailing their knowledge and experience.

6. Will the Applicant service loans that it did not make or arrange under its mortgage broker license (third party servicing)?

Yes ☐ No ☐

NOTE: If the Applicant services loans that it did not make or arrange under its mortgage broker license, it must obtain and maintain a Supplemental Mortgage Servicer License. Refer to the Nevada NMLS page to obtain further details and to submit the application.

Mortgage Broker Signature and Oath of Applicant

The undersigned swear and affirm that the information contained herein and attachments hereto are true and correct to the best of my knowledge and that I am authorized to submit this application on behalf of the applicant. Further, the provisions of Chapter 645B of the Nevada Revised Statutes and related regulations have been reviewed by the control persons and qualified employee of the applicant as listed herein, and all employees of the applicant will be made aware of such laws and regulations and amendments adopted hereafter. Any false statement or omission of material information in connection with this application shall be punished as provided in the law and may subject the applicant to denial of a license or revocation of a license granted.

BY:

Signature of Authorized Official

Date

Printed Name of Authorized Official

Title

NOTARY:

State of _____ County of _____
On this _____ day of _____, 20____, before me, the undersigned notary, personally appeared _____

Personally known to me, or proved to me through government-issued documentary evidence in the form of _____ to be the person who signed the proceeding document in my presence and swore to me that the signature is voluntary and the document truthful.

My commission expires _____

Official Seal and signature of notary: