

STATE OF MAINE
BUREAU OF CONSUMER CREDIT PROTECTION
35 STATE HOUSE STATION
AUGUSTA, ME 04333-0035
TELEPHONE: (207) 624-8527 FAX: (207) 582-7699
MAINE CONSUMER CREDIT CODE
ANNUAL NOTIFICATION
GENERAL CREDITOR

In accordance with the provisions of the Maine Consumer Credit Code, this notification is hereby filed with the Superintendent of the Bureau of Consumer Credit Protection.

FOR OFFICE USE ONLY

DATE NOTIFICATION REC'D: _____

AMOUNT FEE REC'D: _____

CASH [] CHECK [] CREDIT CARD []

CHECK NUMBER: _____

CHECKED BY: _____

DATE ENTRY: _____

1. **Business Name:** _____

2. **D/B/A:** _____ **FEIN/SSN:** _____

3. **Mailing Address:** _____

City/Town: _____ **State:** _____ **Zip:** _____

4. **Physical Address:** _____

City/Town: _____ **State:** _____ **Zip:** _____

5. **Telephone:** _____ **Email Address:** _____

6. **Number Of Additional Locations That Extend Credit To Maine Consumers:** _____
Addresses: _____

(Use separate sheet if necessary)

7. **Location of Records of Credit Transactions:** _____

Contact Person: Include the name, title, address and telephone number of the person to contact for the scheduling of our compliance examination: _____

8. **Business Structure:**

☐ Proprietorship

☐ Partnership

☐ Corporation

A. Names and Addresses of Proprietor, Partners, or Corporate Officers, as Appropriate:

(Use separate sheet if necessary)

B. Type and Description of Business. List type and description of business (Store, Hardware dealer, Rent- to-Own or Mobile Home Dealer, etc.):

NOTE: Please attach copies of contracts issued and signed by consumers.

9. Name, Address, and Email Address of the Person to Whom We May Send Legal Notices:

10. **FOR STATISTICAL PURPOSES ONLY IN ACCORDANCE WITH SECTION 6-104(1)(D) OF THE MAINE CONSUMER CREDIT CODE, THE OFFICE REQUIRES DISCLOSURE OF THE FOLLOWING INFORMATION, WHICH WILL BE DE-IDENTIFIED AND USED FOR STATISTICAL PURPOSES ONLY.**

NUMBER OF MAINE REPOSSESSIONS DURING the last calendar year – (Motor Vehicles, Boats, Snowmobiles, etc.): _____

11. LIST SALES FINANCE COMPANIES, BANKS OR OTHERS TO WHICH CONSUMER CREDIT TRANSACTIONS WERE ASSIGNED (e.g. GECAP, GMAC, FORD MOTOR CREDIT, ACME TRUST CO., SAVINGS BANK, FINANCE COMPANY) DURING THE PAST CALENDAR YEAR AND THE DOLLAR AMOUNTS ASSIGNED:

<u>NAME</u>	<u>ADDRESS</u>	<u>VOLUME</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

12. ORIGINAL UNPAID BALANCES OF ALL CONSUMER CREDIT TRANSACTIONS ENTERED INTO IN MAINE DURING THE PAST CALENDAR YEAR. INCLUDE, UNDER #12(B), ALL AMOUNTS ASSIGNED TO FIRMS LISTED IN #11 ABOVE UNLESS THOSE FIRMS HAVE ALREADY PAID THE VOLUME FEE. IF THEY PAID THE VOLUME FEE, LEAVE #12(B) BLANK. (If uncertain, contact your assignee.)

A. INTERNAL CREDIT (In-House Financing):

Closed-End Credit Sales	\$ _____
Open-End Credit Sales (Revolving Credit)	\$ _____
Leases	\$ _____
For Rent-to-Own (gross rental receipts)	\$ _____

B. ASSIGNED CREDIT

(From #11 – if applicable): \$ _____

TOTAL VOLUME (12A + 12B) \$ _____

13. FEES DUE:

A.	VOLUME FEE (See Schedule Below)	\$	_____
B.	ANNUAL NOTIFICATION FEE (Main Office)	\$	<u>20.00</u>
C.	BRANCH FEE (\$10 Each Additional Location)	\$	_____
D.	TOTAL FEES DUE (Sum of A, B & C)	\$	_____

I hereby certify that the statements in the foregoing report are true and correct to the best of my knowledge and belief.

Dated at _____ this _____ day of _____, _____

Signature

By: _____

Name Typed or Printed Legibly

Title: _____

RETURN WITH PROPER FEES TO:

Bureau of Consumer Credit Protection, 35 State House Station, Augusta, ME 04333-0035

ALL CHECKS MUST BE MADE PAYABLE TO "TREASURER, STATE OF MAINE"

Maine law (5 M.R.S.A. §130) requires assessment of \$20 for any check returned for insufficient funds.

NOTICE REGARDING PUBLIC INFORMATION

This application is a public record for purposes of Maine's Freedom of Access Law, 1 MRSA §401, et seq. Public records must be made available to any person upon request. Information that you supply as part of this application (except your Social Security number) is public information. Other licensing records to which this information may later be transferred are also considered public records. Where permitted by law, your name, license number, mailing address and other information listed on this application may be posted on the State's website.

SCHEDULE OF FEES**USE TOTAL VOLUME FROM LINE 13**

VOLUME AMOUNT	FEE	VOLUME AMOUNT	FEE
\$ 1 TO \$100,000 -----	\$ 25	\$500,001 TO \$600,000 -----	\$150
\$100,001 TO \$200,000 -----	\$ 50	\$600,001 TO \$700,000 -----	\$175
\$200,001 TO \$300,000 -----	\$ 75	\$700,001 TO \$800,000 -----	\$200
\$300,001 TO \$400,000 -----	\$100	\$800,001 TO \$900,000 -----	\$225
\$400,001 TO \$500,000 -----	\$125	\$900,001 TO \$1,000,000 -----	\$250*

*If your volume was in excess of \$1,000,000 you can readily calculate the fee by extending the schedule.