

**VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
OFFICE OF CONSUMER AFFAIRS**

PO Box 526 • Richmond, VA 23218-0526

Consumer Protection Hotline (800) 552-9963 or (804) 786-2042 • Fax: (804) 225-2666 • [www.vdacs.virginia.gov](http://www.vdacs.virginia.gov)

OCA-71 Revised 07/06

**APPLICATION FOR REGISTRATION  
CREDIT SERVICES BUSINESS**

1. Name of business: \_\_\_\_\_

Trading as: \_\_\_\_\_

Business address(es): \_\_\_\_\_

\_\_\_\_\_

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

Telephone (\_\_\_\_\_) \_\_\_\_\_

Type of business: Corporation                      Partnership                      Sole Proprietorship

If corporation, state of incorporation: \_\_\_\_\_

2. Name of registered agent: \_\_\_\_\_

Address: \_\_\_\_\_

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

3. List the name and address of any person who directly or indirectly owns or controls a ten percent or greater interest in the credit services business (Attach additional sheets if needed):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. List the standard fees charged by your company with a brief explanation of the services performed for each fee.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Provide the name and address of the surety company that issued a bond or the name and address of the bank that issued a letter of credit pursuant to § 59.1-335.4.

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Bond number or letter of credit number: \_\_\_\_\_

Amount of bond or letter of credit: \_\_\_\_\_

6. Have you attached the bond or letter of credit? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, please explain why. \_\_\_\_\_

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7. Has there been any litigation or unresolved complaint filed against you within the preceding five years with a governmental authority of the Commonwealth, or the governmental authority of any other state or the United States relating to the operation of your credit services business? Yes \_\_\_ No \_\_\_

If yes, attach a complete description and explanation of the litigation or unresolved complaint, including a statement indicating in what jurisdiction the action or complaint is pending.

If no, you must attest to the following:

I certify that there has been no litigation nor any unresolved complaints within the preceding five years with a governmental authority of the Commonwealth, any other state or the United States relating to the operation of the credit services business.

\_\_\_\_\_  
Signature/Title

8. Attach a copy of the information statement that you are required by §59.1-335.6, Code of Virginia, to provide to any consumer prior to entering into a contract for your services.
9. Attach a copy of all contracts which the credit services business intends to execute with its consumers.
10. Attach your check, payable to the "Treasurer of Virginia" in the amount of \$100, and the enclosed "remittance form". Follow the instructions for mailing at the bottom of the remittance form.

I certify that all the information contained in this registration statement is true and correct.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

\_\_\_\_\_

Print Name

\_\_\_\_\_

Title

This day, personally before me, \_\_\_\_\_  
Known to me to be such person and he/she signed and swore to the truth of the foregoing registration statement.

\_\_\_\_\_

Date

\_\_\_\_\_

Notary Public

My commission expires: \_\_\_\_\_

**Note:** an authorized officer or agent must sign this registration form. Registration forms that are not completely filled out, signed and notarized will not be effective and the credit service business will be considered unregistered.