

**BIOGRAPHICAL SUMMARY
FOR TITLE LOAN LENDER**

(YOU MAY PHOTOCOPY THIS FORM IF ADDITIONAL SUMMARIES ARE NEEDED)

This supplement to the Application for Title Loan Lender License must be completed by each executive officer, director, general partner, and each ultimate equitable owner of 10% or more interest in the business.

Name of entity applying to become a Title Loan Lender:

My involvement with the above listed applicant is as follows: (Check all that apply.)

____ Chief Officer

____ Owner of 10% or more

____ Director

____ Partner

____ Other

1. General Information

Name: _____
Last
First
Middle

Also Known As: _____
(Maiden name, all previous married names, aliases, etc.)

Address: _____
Residence Number and Street
City
State
Zip
Telephone

Business Number and Street
City
State
Zip
Telephone

Social Security Number*: (Provide Social Security Number in SSN Section located on the last page of this document)

Driver's License Number: _____ Date of Birth: _____

Spouse's Name: _____ Marital Status: _____

2. Residence

(In reverse chronological order from age 18 or for the last ten years, whichever is shorter.)

Number and Street	City, Town, etc.	County	State	From		To	
				Mo.	Yr.	Mo.	Yr.

3. Employment Record for the Last Ten Years

(Arrange in reverse chronological order and include self-employment and periods of employment.)

From Mo. Yr.	To Mo. Yr.	Name and Address of Employer	Type of Business	Title and Duties	Reason for Leaving
	Present				

4. Professional Licenses and Certification

Type of License or Certification Number	Licensing Authority	Date Issued		Time Devoted to Practice	
		Mo.	Yr.	Full-Time	Part-Time

Has your right to engage in any profession or business that requires licensing or approval of any kind ever been denied or acted against in any manner, or is any such action pending involving fraud, dishonest dealing, or any other act of moral turpitude? ___Yes___No

If Yes, explain: _____

5. Are you the subject of a pending criminal prosecution or governmental enforcement action in any jurisdiction involving fraud, dishonest dealing, or any other act of moral turpitude? ___Yes___No

6. Have you ever pleaded nolo contendere, been convicted, or found guilty, regardless of adjudication, of any crime involving fraud, dishonest dealing, or any other act of moral turpitude? ___Yes___No

7. Have you ever pleaded nolo contendere to, or have been convicted or found guilty of a felony, regardless of adjudication, within the last ten (10) years? ___Yes___No

Rule 69V-45.010(2), F.A.C., defines "Moral Turpitude" as follows:

Moral Turpitude involves duties owed by persons to society as well as acts contrary to justice, honesty, principle or good morals. This includes, but is not limited to, theft, extortion, use of mail to obtain property under false pretenses, tax evasion, and the sale of (or intent to sell) controlled substances.

IMPORTANT: For every "Yes" answer to Questions 4, 5, 6, and 7 above, complete the following and attach detailed documentation. Include a copy of the allegations, current status, and/or final disposition of the case(s).

Name and Address of Enforcement Authority	Court, Location and Case Number	Nature of Charge	Date Filed	Status or Disposition

Refer to Rule 69V-45.005, F.A.C., Restoration of Civil Rights:

If one's civil rights have been restored and the conviction did not directly relate to the title loan industry, the applicant shall provide evidence of restoration of civil rights. If one's civil rights have been restored and the conviction is directly related to the title loan industry, the applicant shall provide evidence of restoration of civil rights and rehabilitation. Evidence of rehabilitation should include, but is not limited to, employment history and letters from probation officers and employers.

8. Are you now or during the last ten (10) years, have you been named as a DEFENDANT in any civil litigation?
 Yes _____ No _____ If yes, provide a copy of the initial complaint, if applicable, amended complaints(s) for all pending cases and complete the following for all pending and prior cases.

Name and Address of Court and Case Number	Nature of the Suit	Date Filed	Status of Disposition

9. Have you or any business or enterprise with which you are currently or have been associated with as an officer, director, representative, agent, or shareholder of 10% or more of the outstanding stock ever been adjudicated bankrupt or had to work out a compromise with a creditor?
 Yes _____ No _____ If yes, complete the following:

Title and Nature of Proceedings	Name and Address of Court and Case Number	Date Filed	Status or Disposition

10. Have you ever had tax liens of any kind filed against you individually or against your business affiliates?
 Yes _____ No _____ If yes, complete the following:

Place Filed/(Court/City/State)	Total Amount of Lien	Date Filed	Date of Satisfaction (If any)

I hereby certify that this Biographical Report, including attached addenda, has been carefully examined by me and the information is true, correct, and complete to the best of my knowledge and belief. I agree and understand that any false or misleading statements or omission of material fact herein, may be cause for the Office to deny the Title Loan Lender license or to initiate proceedings against the license.

I hereby authorize the Office to investigate my background and my credit history and to request any information from any source necessary to verify or determine the accuracy of data submitted in the application.

I declare that I have read the foregoing Biographical Summary for Title Loan Lender and that the facts stated in it are true.

Signature

Date

*** Notice Regarding Collection and Use of Social Security Numbers**

This form requests the applicant's executive officer, director, general partner, or each ultimate equitable owner of 10% or more interest to provide social security numbers. In accordance with sections 119.071(5)(a)2.a. and b., F.S., the OFR gives the following notice regarding the OFR's collection and use of social security numbers:

(a) The OFR's collection of social security numbers in this form is not expressly authorized by or mandatory under federal or state law, but it is imperative for the performance of the OFR's duties and responsibilities to conduct criminal history background checks pursuant to s. 537.004, F.S.

(b) Social security numbers collected by the OFR may not be used by the OFR for any purpose other than the purpose provided in this notice.

(c) Social security numbers held by the OFR are confidential and exempt from section 119.07(1), F.S., and Section 24(a), Article I of the State Constitution. This exemption does not supersede any federal law prohibiting the release of social security numbers or any other applicable public records exemption for social security numbers existing prior to May 13, 2002, or created thereafter.

(d) Social security numbers held by the OFR may be disclosed if any of the following apply:

1. The disclosure of the social security number is expressly required by federal or state law or a court order;
2. The disclosure of the social security number is necessary for the receiving agency or governmental entity to perform its duties and responsibilities;
3. The individual expressly consents in writing to the disclosure of his or her social security number;
4. The disclosure of the social security number is made to comply with the USA Patriot Act of 2001, Pub. L. No. 107-56, or Presidential Executive Order 13224;
5. The disclosure of the social security number is made to a commercial entity for the permissible uses set forth in the federal Driver's Privacy Protection Act of 1994, 18 U.S.C. sections 2721 et seq.; the Fair Credit Reporting Act, 15 U.S.C. sections 1681 et seq.; or the Financial Services Modernization Act of 1999, 15 U.S.C. sections 6801 et seq., provided that the authorized commercial entity complies with the requirements of this paragraph;
6. The disclosure of the social security number is for the purpose of the administration of health benefits for an agency employee or his or her dependents;
7. The disclosure of the social security number is for the purpose of the administration of a pension fund administered for the agency employee's retirement fund, deferred compensation plan, or defined contribution plan; or
8. The disclosure of the social security number is for the purpose of the administration of the Uniform Commercial Code by the office of the Secretary of State.