



STATE OF WYOMING

DEPARTMENT OF AUDIT

Matthew H. Mead
Governor

Michael Geesey
Director

Jeffrey C. Vogel
Commissioner

DIVISION OF BANKING

Department of Audit

(307) 777-3497 Fax (307) 777-3555 Email: maitchison@wyaudit.state.wy.us

WYOMING RESIDENTIAL MORTGAGE PRACTICES ACT CERTIFICATE OF EXEMPTION APPLICATION

Type of Mortgage Business (check all that apply):

- Residential Mortgage Lending Residential Mortgage Brokering

Applicant Information

Individual

Last Name		First Name	Middle Initial
DBA – Assumed Name			
Street Address (P.O. Box must include Street Address)			
City	State	Zip Code	
Date of Birth	Business Telephone Number	Social Security Number	

Business Entity

Legal Name of Business Entity		
DBA – Assumed Name		
Check One: <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other (please indicate)		
Street Address (P.O. Box must include Street Address)		
City	State	Zip Code
Tax Identification Number		Business Telephone Number



Please answer the following questions so the Division of Banking can determine your need for a mortgage lender or broker license in the State of Wyoming.

	Yes	No
1. Are you an agency of the United States or of this state and its political subdivisions?		
2. Is your company licensed or chartered under the laws of any state or the United States as a bank, savings and loan association, credit union, or trust company or an operating subsidiary of which is owned by eighty percent (80%) or more of the voting stock?		
3. Are you an attorney, licensed to practice law in Wyoming, providing services in the course of practice as an attorney and not principally engaged in the business of negotiating residential mortgage loans?		
4. Are you a person employed by or under contract with a licensee on a full time basis, or part time basis with no more than one (1) licensee?		
5. Do you originate loans with borrowers that are funded at closing by another entity?		
6. Do you set any of the terms or conditions of the loan including but not limited to, interest rate, payment terms, etc.?		
7. Do you process and close loans obtained through agreements with brokers?		
8. Do you directly or indirectly solicit borrowers in Wyoming for the purpose of making residential mortgage loans through any form of advertising, contact, or referrals including but not limited to Internet or other electronic means?		
9. Does your name appear anywhere on the HUD closing statement for the loan?		
10. Is your sole business funding ¹ of residential mortgage loans after they have closed?		

The Wyoming Division of Banking (Division) does not issue any exemption certificate on a permanent basis. The current exemption status obtained by this application is for the information provided to us at the present time. The Division recommends entities monitor changes made to Wyoming statutes and regulations governing Mortgage Lending and Brokering as this may change an entity's exemption status or the need to obtain a license. Changes in the entity's business operations may change their status as well. If these changes occur and the entity has not complied with the regulations pursuant to the change, the Division retains the right to enforce all powers and duties of this office as applicable to the current statutes and regulations.

If the Division determines a Residential Mortgage Lender/Broker license is not needed for the State of Wyoming at the time of this application, a certificate of exemption will be issued. If the Division determines a license is needed, you will be required to obtain this license prior to conducting Residential Mortgage business in this state.

¹ Exemption would only apply if this was done as a secondary market transaction and the loan was **closed** with another entity.

State of _____)
)ss.
County of _____)

I hereby certify that, on this _____ day of _____, 20_____, the undersigned has/have executed the foregoing Application for and on behalf of the Applicant, being duly authorized to do so; and further that the information and statements contained in the foregoing Application, including all exhibits and other documents attached thereto and all other information filed therewith, all of which are made a part of the foregoing Application, are correct, true, accurate and complete; and further that the Applicant knows and understands that, if the Applicant has knowingly made a false statement of a material fact in this Application or in any documentation provided to support the foregoing Application, then the foregoing Application must be denied.

Name of Applicant

By: _____
Authorized Signatory to Sign for Applicant

Printed/Typed Name and Title of Signatory

Acknowledgement

State of _____)
) ss.
County of _____)

The foregoing Certificate of Exemption Application was acknowledged before me by _____, on this _____ day of _____, 20 _____.

Witness my hand and official seal.

(SEAL)

Notary Public

My Commission Expires: _____