

OFFICE OF THE DIRECTOR OF BANKING
DEPARTMENT OF COMMERCE
COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
CAPITOL HILL, SAIPAN, MP 96950

(License Fee \$300.00)
RENEWAL APPLICATION FOR FOREIGN EXCHANGE LICENSE
(To be filled out using a typewriter or block letters)

Pursuant to Section 6351 of the Commonwealth Banking Code of 1984, Public Law 3-104 (Foreign Exchange), the undersigned, a duly authorized representative of (licensee name) _____, herewith submit application for renewal of the foreign exchange license originally issued by the Department of Commerce on _____ and herewith declare under oath that the information set forth in the original application is in compliance with the Act and remains unchanged except the following matters:

State present variances from original application

1. Has there been any change made on management? YES NO
2. Has there been any change in agents, those who have not been registered with the Director of Banking? YES NO. If licensee is not solely in the business of foreign exchange, please attach a listing of persons names and job titles doing foreign exchange transactions.
3. Were there any persons connected with the business convicted of a felony within the past 12 months? YES NO
4. Current financial statements must be attached to this application.
5. Were there any other offices open other than the location given in the original application, for the transaction of foreign exchange? YES NO. If so, list the additional offices established _____

6. Were there any other changes not listed above? YES NO. If so, provide details _____

By: _____
Name and Title Date

Signature

COMMONWEALTH OF THE NORTHERN)
MARIANA ISLANDS)
) ss.
Saipan)

_____ being duly first sworn on oath deposes and says that he/she is the applicant named in the foregoing statement, that he/she has read the statement and all documents attached thereto, that the information contained in the statement and the documents is true to the best of his/her knowledge and belief.

Subscribed and sworn to before me this _____ day of _____ 20____

My Commission Expires _____