



# WEST VIRGINIA MORTGAGE LICENSEE

## Statistical Activity Report

<b>Mail to:</b>	<b>WV Division of Financial Institutions</b> <b>Attention: Mortgage Division</b> <b>900 Pennsylvania Ave.</b> <b>Suite 306</b> <b>Charleston, WV 25302-3542</b>	<b>Questions?</b>  <b>Telephone:</b> (304) 558-2294	
		<b>Legislation and Statutory Access:</b>	<a href="http://www.legis.state.wv.us">www.legis.state.wv.us</a>

This form should be only be prepared by companies surrendering all licenses issued by the West Virginia Division of Financial Institutions.

This form has been prepared as a Microsoft Word Form and must be navigated using the tab key or other directional keys. **Each field will expand to accommodate the response as needed.** Do not try to reformat the file. The application should be completed in Microsoft Word, printed and signed before mailing with the appropriate exhibits and fees to the address provided above.

**If the licensee holds both lender and broker licenses, a form must be submitted separately for each type.**

This form should be submitted within 15 days of the termination of West Virginia mortgage activity. Late filing will subject the licensee to penalties of \$100 per day late and additional enforcement action.

### Part 1 – General Information

License type surrendered: <b>(Select one only)</b>		<input type="checkbox"/> Lender	<input type="checkbox"/> Broker
Full legal name of licensee: [REDACTED]			
Mortgage License Number of Main Office: [REDACTED]			
Main office street address: [REDACTED]			
City: [REDACTED]	State: [REDACTED]	Zip Code: [REDACTED]	
Business phone number: [REDACTED]		Business fax number: [REDACTED]	

### Part 2 - Loan Volume

Provide a listing of all mortgage loans transacted under the above referenced license since the most recent reporting period and through the date of license cancellation. The listing should include: Date Loan Closed, Original Lender, Borrower's Name and Address, Original Loan Amount, and Appraiser's Name.

Exhibit

Number of Loans Provided Above: \_\_\_\_\_ This number will be later used for the loan assessment fee calculation.

<b>Part 3 – Contact Information</b>		
<b>General Contact</b>		
Name:	Title:	
Mailing Address:		
City:	State:	Zip Code:
Telephone:	Fax:	Email:
<b>Legal Contact</b>		
Name:	Title:	
Mailing Address:		
City:	State:	Zip Code:
Telephone:	Fax:	Email:
<b>Consumer Complaint Contact</b>		
Name:	Title:	
Mailing Address:		
City:	State:	Zip Code:
Telephone:	Fax:	Email:
<b>Part 4 – Examination and Record Information</b>		
Provide the location and address for examination purposes.		
Address:		
City:	State:	Zip Code:
Telephone:	Fax:	Email:

**Part 5 – Fee Calculation**

Loan Assessment Fee - # of loans @ \$5.00 each =

**Total Assessment Fee Payable To The WV Division Of Financial Institutions**

**Attestation**

Licensee represents that all information provided with this form is true and complete to the best of their knowledge and belief.

Executed the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Licensee

By: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Name, Title and Phone Number