

# **DoBS Portal**

# **User Guide**

Version – 2.5

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## **Document Purpose**

The Commonwealth of Pennsylvania Department of Banking and Securities (DOBS) has launched a DOBS Portal to allow for Non-Depository institutions to apply for licenses and update their information. This document is to provide the steps on how to use the DOBS Portal.

# **DOBS Portal Information**

The DOBS Portal can be accessed in Chrome or Microsoft Edge using the URL provided below:

https://www.portal.dobs.pa.gov/

# **Access and User Authentication**

The DOBS Portal uses Keystone authentication which is used across other Commonwealth of Pennsylvania websites. The user will need to create a Keystone Login Account to proceed with using the DOBS Portal. An email address and/or cell phone number is required by the DOBS Portal when creating the Keystone Login Account.

The Portal will require multi-factor authentication (MFA) when logging in to ensure maximum security.

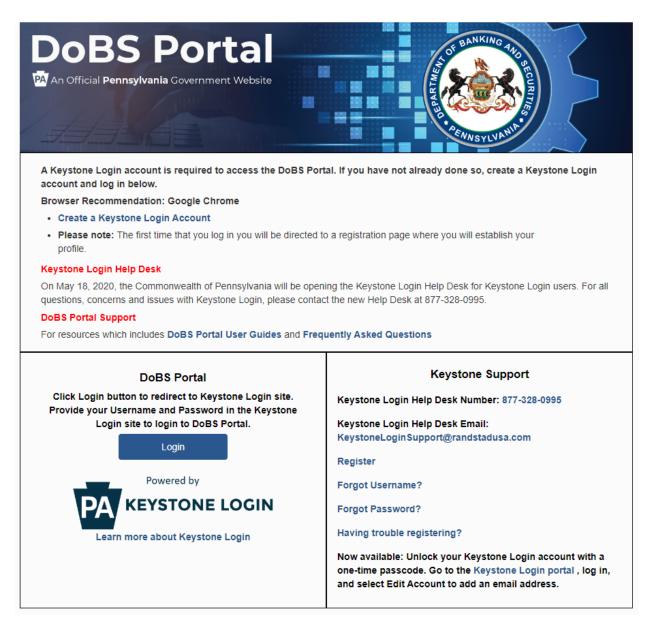
**What is MFA?** MFA is a layered approach to securing online accounts and the data they contain. MFA requires more than one way to authenticate your identity so that if one method, such as your password, is compromised, the additional verification methods provide an added layer of security.

What to expect? You will continue to use your Keystone Login to access the DoBS Portal. Once you have entered your Keystone Login credentials, you will be prompted to enter a six-digit code (or token) that will be sent to the email address associated with your Keystone Login Account. If you have not successfully logged in within twenty minutes of receiving this unique code, you will need to hit the "Resend Code" button on the DoBS Portal

**Login page:** If you have not registered an email address or cell phone number with your Keystone Login Account, you will receive an error message indicating that you must update your Keystone Login Account to proceed.



This document does not include any Keystone related documentation, but links are available on the login screen for additional references.





# **Program Selection**

The DOBS Portal will be used by the different programs underneath the Department of Banking and Securities. Once a user has logged-in successfully, the user will be prompted to select the Program that they want to interact with. This document is focused on the Non-Depository program so selecting Non-Depository would allow the user to proceed.

Self-Service Program Selection		DoBS Portal		Welcome, Robert Drake Logout
	Non-Depository	Depository	Registration	
	Licensing, management, and compliance enforcement of non-banking lenders.	Licensing, management, and compliance enforcement of banking lenders.	Management of broker- dealers and agents, investment advisers and representatives, and notice filers.	
	Open	Open	Open	
	- Any -			
	Corp Finance			
	Review and management of security offerings prior to the security being offered for sale.			
	Open			

# **Non-Depository Dashboard**

The Non-Depository Dashboard will show the Pending Tasks, My Entities and Draft License Applications associated with the user.

Self-Service Program Selection	DoBS Portal	Welcome, Robert Drake Logou
Non-Depository		Actions -
Pending Tasks		
My Entities		
Draft License Applications		



# **General – Navigation**

The DOBS Portal allows the user to navigate through different screens using 2 ways. The user can either click the name of the tab on the left or click on the [Previous] / [Next] buttons at the bottom of the screen. The tab that the user is currently in will also have a different background color.

Home / Create A New Entity		
Identification	Locations	🖺 Save
Locations	Please provide the following information about all locations assocaited with licenses which will be applied for this entity.	
Entity Officers	Add Location	
Books and Records	No Locations Provided	
Affirmation	≮ Previous	Next <b>&gt;</b>

# **General – Save**

The DOBS Portal allows the user to save information without submitting it for processing. This allows the user to enter the information and go back at a later time to complete it and submit. The [Save] button is available at various screens in the system.

Home / Create A New Entity		
Identification	Locations	🖺 Save
Locations	Please provide the following information about all locations assocaited with licenses which will be applied for this entity.	
Entity Officers	Add Location	
Books and Records	No Locations Provided	
Affirmation	< Previous	Next >

# **General – Attach File**

The DOBS Portal allows the user to attach various documents and files. This is a secure way of providing documentation to the DOBS. The [Attach File] button is available at various areas in the system.

List all types of business offered on your website	List all types of business offered on your website
Attach Articles of Incorporation	Attach File
Attach Operating Agreement	Attach File
Attach By-Laws	Attach File



# **Creating a New Entity**

For institutions who have not transacted with the Department of Banking and Securities – Non-Depository, they will need to provide information of the entity that they are associated with. The steps below outline how an entity can be created in the DOBS Portal.

1. On the Non-Depository dashboard, click on the [Actions] button on right and select [Create a New Entity].

Self-Service Program Selection	DoBS Portal	Welcome, Robert Drake Logout
Non-Depository		Actions <del>v</del>
Pending Tasks		Create a New Entity Join an Entity Using a Join Code
My Entities No Entities Created << < 1 > >>		
No Draft Applications Started		

 On the [Create A New Entity] screen, provide all the information regarding the entity. The [Create a New Entity] screen has 5 sections (Identification, Locations, Entity Officers, Books and Records, Affirmation) which will need to be completed. Required fields will have a \* beside them.

[Entity Forced Name] is the alternate name approved by the Pennsylvania Department of State when the Legal name is already used in Pennsylvania.

If the entity was incorporated/formed in any state other than Pennsylvania, you will need to check the [Is this a foreign entity?] button and complete the required information.

Self-Service Program Selection		DoBS	Portal	
Create A New Entity				
tome / Create A New Entity				
fentification	Identification			(B) Save
cations	How is business organized? *			~
ntity Officers	Entity Name *	Entity Name		
ooks and Records	Entity Name 2	Entity Name 2		
firmation	Entity Forced Name	Entity Forced Name		
	Federal ID Number *	Federal ID Number		
	Phone Number	Phone Number	Phone Number Ext	Phone Number Ext
	Secondary Phone Number	Secondary Phone Number	Secondary Phone Number Ext	Secondary Phone Number Ext
	Fax Number	Fax Number	Fax Number Ext	Fax Number Ext
	Incorporation Date	Incorporation Date	Incorporation Place	- · ·
	Company Web Address	Company Web Address		
	List all types of business offered on your website	List all types of business offered on your website		
				te.
	Attach Articles of Incorporation	Attach File Maximum file size per attachment: 300 MB.		
	Attach Operating Agreement	Attach File		
		Maximum file size per attachment: 300 MB.		
	Attach By-Laws	Attach File Ø Maximum file size per attachment: 300 MB.		
	Legal Exception for Providing Documents	Please provide legal opinion here if you are claiming exempt	on from providing the requested documentation.	
	Is this a foreign entity?	O Ves 🔹 No		R



Note that there will be buttons on the various screens where multiple entries will be allowed. For example, on the [Identification] section,

The [D/B/A], [Locations], [Entity Officers] and [Books and Records] section provide an ability to add multiple entries for their respective sections. Click [Next] to advance to the next section or [Save] to save your work and continue at a later time.

#### [D/B/A] section

Click on the [D/B/A/ tab, then click [Add a New D/B/A].

Home / DBA TEST ENTITY	D/B/A
Pending Tasks	Add a New D/B/A
Active Applications	
Identification	
D/B/A	
Locations	

Enter the DBA name, attach the approved fictitious name registration from the Pennsylvania Department of State and the date the DBA was approved for use. Click [Add New D/B/A].

You can add multiple DBAs by clicking the [Add a New DBA] button again. Repeat the above process for each new DBA.

#### [Locations] section

Click [Add Location] to begin. There must be 1 location designated as the headquarters. The headquarters location may or may not have a license.

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*



d Location				
cation				Rem
Headquarters	This location is my headquart * Only one location can be set as		5.	
Country*	United States			
Street Address*	Street and number, P.O. box, c/o.			
	Apartment, suite, unit, building	I, floor, etc.		
City*	City			
Zip / Postal Code *	Zip / Postal Code	State / Province		
County	Out of State			
Office Phone Number *	Office Phone Number	Office Fax Number	Office Fax Number	
		Number		

#### [Entity Officers] section

Click [Add Officers] to begin. Click on the [Instructions] in the upper right-hand corner for officer type descriptions.

The [Add Associated License] button allows for multiple entries and the [x] button will remove an entry.

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*

Identification	Entity Officers				E Sav		
Locations	Please provide the following information	n about all officers, directors, owners, partn	ers or members and any ma	anagers of the entity.			
Entity Officers	Add Entity Officer						
Books and Records	Entity Officer			Re	move		
Affirmation	Officer Type *		Title *				
		*	Title				
	First Name *		Last Name *				
	First Name		Last Name				
	Middle Name						
	Middle Name						
	Social Security Number *		Date of Birth *				
	Social Security Number		Date Of Birth				
	Home Phone Number*		Cell Phone Number*				
	Home Phone Number		Cell Phone Number				
	Email Address *						
	Email						
	Country*						
	United States						
	Street Address *						
	Street and number, P.O. box, c/o.	Street and number, P.O. box, c/o.					
	Apartment, suite, unit, building, floor, etc.						
	City*						
	City						
	Zip / Postal Code *	State / Province*		County			
	Zip / Postal Code		~	Out of State	~		
	Please list below all other entities that	Other Associated Department of Banking and Securities Licenses Please is to below all other entities that have been icensed or are currently licensed by the Department, for which this individual has ever been involved:					
	Business Name	Liceose Type	License Type				
	Dusiriess warrie						



#### [Books and Records] section \*\*Please take note of the Country designation, it is defaulted to United States.\*\*

Identification	Books and Records				🖺 Save	
Locations	Please provide the following information a	bout all address where any offical boo	oks or records related to the ent	ity are kept.		
Entity Officers	Add Books/Records Address					
Books and Records	Books/Records Address				Remove	
Affirmation	Company Name *	Company Name				
	First Name *	First Name				
	Last Name *	Last Name				
	Phone Number *	Phone Number	- Fi	ax Number	Fax Number	
	Email	Email				
	Country*	United States		~		
	Street Address* Street and number, P.O. box, c/o.					
	Apartment, suite, unit, building, floor, etc.					
	City*	City				
	Zip / Postal Code *	Zip / Postal Code	State / Province		<b>~</b>	
	County	Out of State			~	
	Comments	Comments Description of the records which are held at this location.				
	< Previous				Next >	

3. Once all the information regarding the entity has been entered, the user will need to affirm the information on the [Affirmation] section and click on the [Submit] button.

When an Entity is submitted to DOBS, all information will be locked and can only be changed using amendments in the system. Prior to submission, the user should make sure that all information is complete, true and correct as it is subject to the penalties.

Self-Service Program Selection	DoBS Portal	Welcome, Robert Drake Logout
Create A New Entity		Instructions
Home / Create A New Entity		
Identification	Affirmation	
Locations	I understand by submitting this form, I am agreeing to be bound by the following declaration *	
Entity Officers	"I declare that all of my answers on this form are complete, true and correct. I make this declaration subject to the penalties of 18 PA.C.S. § 4904 relating to unsworn falsification to authorities."	
Books and Records	Cancel Submit	
Affirmation		
	<pre>¢ Previous</pre>	





4. When the [Submit] button has been clicked, the Entity can now be seen on the Non-Depository Dashboard. This will enable the user to submit applications, amendments and provide access to other users. Instructions for applying for a license can be found on subsequent pages.

Self-Service Program Selection	DoBS Porta	al	Welcome, Robert Drake Logout
Non-Depository			Actions
Pending Tasks			
My Entities			
Entity Name ACME Lending	Federal ID Number 45-4574747	Status Registered	Open
ex     ex     1     >       Draft License Applications       No Draft Applications Started       ex     ex     1     >			

# **Joining an Entity**

If an institution already exists in the DOBS Portal system, users are invited using a Join Code that is received in their email. Once a Keystone log-in has been created and a user logs in to the DOBS Portal, the user can then click on the [Actions] button then select [Join an Entity Using a Join Code].

Self-Service Program Selection	DoBS Portal	Welcome, Robert Drake Logout
Non-Depository		Actions 🗸
		Create a New Entity
		Join an Entity Using a Join Code

The user will then be prompted with a screen where the Join Code can be entered.

Join an Entity	×	¢
Join Code *	Join Code	
	Cancel Submit	



# **Accessing the Entity Dashboard**

On the Non-Depository dashboard, the user can click on the Open for an entity that they are associated with. This allows the user to view entity information as well various Entity Actions.

Self-Service Program Selection			DoBS Portal			Welcome, Robert Drake Logout
Non-Depository						Actions 💌
Pending Tasks						
My Entities						
Entity Name ACME Lending		Federal ID Number 45-4574747		Status Registered		Open
Draft License Applications						
ACME Lending						Entity Actions 🗸
Federal ID Number         Web Address           99-9999924						
Home / ACME Lending						
Pending Tasks	Pending Tasks					
Active Applications	Task Name	License Type	License Number	Location	Assigned On	Due Date
Identification			No Pendi	ng Tasks		
D/B/A	<< < 1 > >>					
Locations						
Entity Officers						
Books and Records						
User Management						



# Applying for a License

The DOBS Portal enables the user to apply for a license online. The user will need to be a member of the Entity that they are applying a license for. Note that NMLS license types are not shown on the DOBS Portal since NMLS licenses should go through NMLS.

1. On the Entity dashboard, the user can click on [Entity Actions] button and select [Apply for a License].

Self-Service Program Selection	DoBS Portal	Welcome, Robert Drake Logout
ACME Lending		Entity Actions 🕶
Federal ID Number Web Address 45-45747477		Apply for a License

2. The [Apply for a License] screen will then be shown, and the user can select the License Type and Location that is associated with the license. Once the entries are selected, click the [Submit] button to initiate a license application for the selected license type. If the location is not displayed, you will need to go back into the Entity and add the location(s).

Self-Service Program Selection	DoBS Porta	Welcome, Robert Drake Logout
ACME Lending		
Federal ID Number Web Address 45-4574747		
Home / ACME Lending / Apply for a Li	cense	
	Apply for a License	
License Type *	-	•
Parent License	-	~
	Required when a branch license is selected. In order to apply for a branch license, an existing primary or pending license application must be selected.	cense
Location *		•
	Cancel Submit	

For Licenses associated with branch locations, the Parent License will need to be selected.

3. Please review the [Requirements] tab for more information on the requirements for licensure.

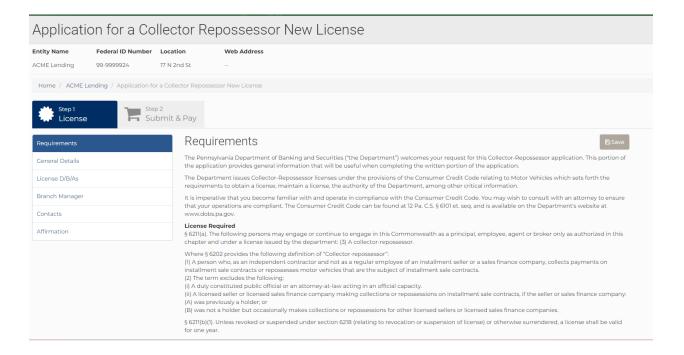


# **Applying for a License – Collector Repossessor**

1. After selecting "Collector Repossessor" as the License Type and the location associated with it on the [Apply for a License] screen, the [Application for a Collector Repossessor New License] screen will be launched. There are 2 Steps – Step 1 License and Step 2 Submit & Pay.

The form has 6 sections – Requirements, General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

The Requirement section outlines all the requirements needed to apply for and maintain a license.



Please complete the General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.



#### [General Details] Section

Application for a Collec	ctor Repossessor New License
Entity Name         Federal ID Number         Local           ACME Lending         99-9999924         17 N	Atlant     Web Address       2nd St
Home / ACME Lending / Application for a Col	llector Repossessor New License
Step 1 License	: & Pay
Requirements	General Details
General Details License D/B/As	Have any officers, directors, owners, partners or members and any managers identified on this application ever been convicted of, pled guilty to, or pled nolo contendere (no contest) or given a diversionary sentence in lieu of conviction to any felony in this Commonwealth or anywhere else? Section 6217(a)(3) of the Consumer Credit Code.*
Branch Manager	O'Yes O'No
Contacts	Within the past ten (10) years, has the applicant's affiliate, owner, partner, member, officer, director, employee or agent pleaded guilty to, entered a plea of nolo contender (no contest) to or been convicted of a violation under Section 6271 (relating to operating without a license) or subsection A of Section 37 of the former act known as the Motor Vehicle Sales Finance Act? Section 6217(b)(2) of the Consumer Credit Code.*
Affirmation	O Yes O No
	Have any legal proceedings involving consumer protection, usury, lending, real estate, licensing violations, breach of judiciary duty, fraud or similar issues been instituted, continued or concluded against the licensee? • O Yes O No
	Bond Information
	A bond in the sum of five thousand dollars (\$5,000) must accompany each application. This bond must be furnished by a surety company legally authorized to transact business in Pennsylvania, and must be written to conform to the period of licensure. Furthermore, the bond must be renewed and re-filed with the Department, along with the submission of the license renewal, no later than September 15 of each year. § 6213
	Name of Bonding Company *
	Bond # • Bond #

#### [License D/B/As] Section

When applying for Collector Repossessor License please select any DBA's that will be associated with this license by clicking the checkbox next to the appropriate name.

Application	on for a Colle	ector Rep	ossessor New License		
Entity Name	Federal ID Number Lo	cation	Web Address		
ACME Motors, Inc.	99-9999924 17	N 2nd St	-		
Home / ACME M	lotors, Inc. / Application for	a Collector Reposse	ssor New License		
Step 1 License	Step 2 Subm	it & Pay			
Requirements		License	e D/B/As		🗈 Save
General Details		Please select	applicable D/B/As		
License D/B/As			Name	Fictitious Name Registration Document	
Branch Manager			This is my test DBA	Unicorn attachment.docx	
Contacts					
Affirmation		Previous			Next >



#### [Branch Manager] Section

Each licensed location requires a designated Branch Manager who is in charge of and responsible for the business operations of the branch location.

Application for a Collector Repossessor New License							
Entity Name	Federal ID Number	Location	Web Address				
ACME Lending	99-9999924	17 N 2nd St	12nd St				
Home / ACME Le	nding / Application fo	or a Collector Reposses	sor New License				
Step 1 License	Ste Ste	<sup>p 2</sup> bmit & Pay					
Requirements		Branch	h Manager			Save	
General Details					h National Criminal History Record Information (fingerprint cards) a or members and any managers as per Section 6217(a)(3) of the Cons		
License D/B/As		Credit Code	e. These forms must be completed along with license applica	tions. It i	or members and any managers as per section 621 (a)(5) of the Cons is also required for all owners, partners, corporations, managers, and leted along with license applications. It is also required for all owner	officers.	
Branch Manager			is, managers, and officers.	ine comp	second along with needse applications, it is also required for an owner	a, parcrera,	
Contacts		First Name	•		Last Name *		
		First Name	e		Last Name		
Affirmation		Middle Nan	ne				
		Middle Na	ime				
		Title *			Suffix		
		Title			Suffix		
		Social Secu	Social Security Number *		Date of Birth *		
		Social Sec	Social Security Number     Date Of Birth       Home Phone Number     Cell Phone Number *		Date Of Birth	<b>m</b>	
		Home Phor					

#### [Contacts] Section

The [Copy Existing Contact] allows the user to get information that was previously entered in the [Contacts] Section or the [Entity Officers] and copy it into the license application. \*\*Please take note of the Country designation, it is defaulted to United States.\*\*

Self-Service Program Selection	DoBS Portal Welcome, Robert Drake Logout
Application for a Colle	ctor Repossessor New License
	iation Web Address ain St
Home / ACME Lending / Application for a C	ollector Repossessor New License
Step 1 License	it & Pay
General Details	Contacts Bave
Contacts	Please provide the following information about the required contact types: Licensing Contact
Affirmation	Copy Existing Contact Add Contact
	CPrevious Next >

# Do Not Use Call Center telephone numbers for your Contact Information



2. Once all the information regarding the license application has been entered, the user will have to affirm the information on the [Affirmation] section. The Name entered will serve as the electronic signature. Click on the [Finalize Application and Proceed to Cart] button to proceed. If information is missing or incomplete, the dashboard will show the tab or tabs with errors and the missing information will be shown in red.

Self-Service Program Selection	DoBS P	Portal	Welcome, Robert Drake Logout
Application for a Colle	ector Repossessor New License		
	cation Web Address Iain St		
Home / ACME Lending / Application for a	ollector Repossessor New License		
License Step 2 Step 1 Subr	it & Pay		
General Details	Affirmation	臣 Save	
Contacts	Understand by submitting this Collector Repossessor Application: I am agreeing to answers on this License Application are complete, true and correct. I make this decl unsworn falsification to authorities." *		
Ammation	l attest that I have read and understand the following (click each for link): 1. Consumer Credit Code		
	2. Motor Vehicle FAQs 3. Motor Vehicle Sales Finance Examination Guide		
	Enter Name Below		
	Finalize Application and Proceed to Cart		
	< Previous		

3. [Step 2 – Submit & Pay] screen will then be launched.

When an application is submitted to DOBS, all information will be locked. Prior to submission, the user should make sure that all information is complete, true and correct as it is subject to the penalties.

Self-Serv	rice Program Selectio	n	-		DoBS Portal		Welcome, Robert Drake Logout
Applicati	on						
Entity Name	Federal ID Number	Location	Web Address				
ACME Lending	45-4574747	1 Main St					
Home / ACMEL	ending / Application						
Submit An		ာ2 ubmit & Pay					
Description	u i uj		Quantity	Unit Price	Amount		
Application Fee							
				Total Amo			
You will be redirecte	ed to the secure Payeezy	/ payment gateway <mark>1</mark>	for paying any outstanding	g fee(s). 🥥			
Submit and Proc	ceed to Payment						

When the user clicks on [Submit and Proceed to Payment], the user will be redirected to a thirdparty vendor – Payeezy – where they will enter their payment information.

Once the payment goes through, the user will be redirected back to the Non-Depository dashboard.



# **Applying for a License – Consumer Discount Company**

 After selecting "Consumer Discount Company" as the License Type and the location associated with it on the [Apply for a License] screen, the [Application for a Consumer Discount Company New License] screen will be launched. There are 2 Steps – Step 1 License and Step 2 Submit & Pay.

The form has 6 sections – Requirements, General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

The Requirement section outlines all the requirements needed to apply for and maintain a license.

Please complete the General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

#### ACME Lending 99-9999924 17 N 2nd St Home / ACME Lending / Application for a Consumer Discount New Li Step 2 Submit & Pay License General Details Requirements Does applicant currently hold one or more consumer discount company licenses? \* General Details O Yes O No License D/B/As Has any director or officer identified on this application ever been charged with, convicted of, pled guilty to, or pled nolo contendere (no contest) to any felony Financial Documents offense in this Commonwealth or anywhere else? Section 12 of the Consumer Discount Company Act O Yes O No Branch Manager Has any director or officer identified on this application ever been directly or indirectly, connected with any organization in Pennsylvania or elsewhere which had any application for license refused by any federal, state or municipal authority, or which had its license or registration suspended, canceled or revoked by Contacts Affirmation such an authority? O Yes O No Have any legal proceedings involving consumer protection, usury, lending, real estate, licensing violations, breach of judiciary duty, fraud or similar issues been instituted, continued or concluded against the licensee? O Yes O No Other Associated Department of Banking and Securities Licenses ess in any licensed place of business or where another business is conducted by the licensee A Consumer Discount Company licensee may conduct business in any incensed place of business or writere another business is conducted by the incenses or another person unless the Department determines that the conduct of such other business has concealed evasions of the Consumer Discount Company Act. Are there any additional business that will be operating from the location of the proposed Consumer Discount Company Licensee? O Yes O No Bond Information A bond in the sum of five thousand dollars (\$5,000) must accompany each application. This bond must be furnished by a surety company legally authorized to transact business in Pennsylvania and must be written to conform to the period of licensure. Bonds must be written to conform to the license period, and as such must expire on June 1 following the date of issuance. Name of Bonding Company \*

#### [General Details] Section



#### [License D/B/As] Section

When applying for Consumer Discount Company License please select any DBA's that will be associated with this license by clicking the checkbox next to the appropriate name.

Self-Service Program Selection			DoBS Portal	
Application for a Consu	imer Dis	scount New License		
Entity NameFederal ID NumberLocalACME Lending99-999992417 N 2		Web Address		
Home / ACME Lending / Application for a Con	sumer Discount N	lew License		
Step 1 License	& Pay			
Requirements	License	D/B/As		Save
General Details	Please select a	applicable D/B/As		
License D/B/As	•	Name	Fictitious Name Registration Document	
Financial Documents		This is my test DBA	TEST ATTACHMENT.docx	
Branch Manager				
Contacts	Previous			Next >
Affirmation				

#### [Financial Documents]

On the Financial documents page, you will need to load the initial or current financial documents.

Self-Service Program Selection	DoBS Portal
Application for a Const	umer Discount New License
Entity Name         Federal ID Number         Local           ACME Lending         99-9999924         17 N	ation     Web Address       2nd St
Home / ACME Lending / Application for a Con	nsumer Discount New License
Step 1 License	& Pay
Requirements	Financial Documents
General Details	The applicant corporation for the initial consumer discount company license must be incorporated with a minimum capitalization (issued and outstanding stock and additional paid-in capital) of \$75,000 (seventy-five thousand dollars). For additional offices, the \$75,000 initial minimum capitalization requirement is
License D/B/As	increased by \$25,000 (twenty-five thousand dollars) per additional office. The minimum capital must be maintained as permanent capital that shall not be distributed to stockholders or be repurchased by a licensee without the prior written approval of the Secretary of Banking and Securities.
Financial Documents	Please attach the initial or current financial statement in accordance with the following:
Branch Manager	<ol> <li>Statements should be prepared and signed by a certified public accountant and prepared in compliance with generally accepted accounting principles.</li> <li>The financial statements must include, as a minimum, a balance sheet, statement of income and expense, retained earnings, change of financial position, any related notes to such statements, as well as other financial information which the Department may require.</li> </ol>
Contacts	3. If the applicant's fiscal year ends 120 days or more prior to the date of initial application, then the applicant must forward the aforementioned financial statements covering the most recent fiscal year; and, the interim financial statements covering the most recent accounting period current to within 60
Affirmation	days of the date of application. Interim financial statements shall be constructed in compliance with the same accounting principles used to prepare the company's annual financial statements and shall be attested as being true and correct by the applicant's president and/or chief accounting officer.
	4. If the applicant is affiliated with another business entity then the applicant shall provide the aforementioned statements reflecting the applicant's financial condition and operation on an unconsolidated basis; and, in addition thereto, the applicant must furnish the same statements on a consolidated and/or combined basis to reflect the economic reality of all affiliations. If you have any questions, please contact the Department's Division of Licensing at 717-787-3717.
	Attach Files
	Maximum file size per attachment: 300 MB. Multiple attachments allowed.



Click on the [Attach Files...] button and select the file you want to attach. You can attach as many financial documents as needed.

[Branch Manager] Section

Each licensed location requires a designated Branch Manager who is in charge of and responsible for the business operations of the branch location.

Application for a Co	onsumer Discount New Li	pense
Entity Name Federal ID Number ACME Lending 99-9999924	Location Web Address	
Home / ACME Lending / Application f	or a Consumer Discount New License	
	ep 2 ubmit & Pay	
Requirements	Branch Manager	El Save
General Details		uires all applicants to provide both National Criminal History Record Information (fingerprint cards) and icers, directors, owners, partners or members and any managers as per Section 6217(a)(3) of the Consumer
License D/B/As	Credit Code. These forms must be completed	long with license applications. It is also required for all owners, partners, corporations, managers, and officers. (PDF) These forms must be completed along with license applications. It is also required for all owners, partners,
Financial Documents	corporations, managers, and officers.	
Branch Manager	First Name *	Last Name *
Contacts	First Name	Last Name
	Middle Name	
Affirmation	Middle Name	
	Title *	Suffix
	Title	Suffix
	Social Security Number *	Date of Birth *
	Social Security Number	Date Of Birth
	Home Phone Number	Cell Phone Number *
	Home Phone Number	Cell Phone Number
	Email Address *	
	Email	

#### [Contacts] Section

The [Copy Existing Contact] allows the user to get information that was previously entered in the [Contacts] Section or the [Entity Officers] and copy it into the license application. \*\*Please take note of the Country designation, it is defaulted to United States.\*\*

Self-Service Program Selection	DoBS Portal
Application for a Consumer D	Discount New License
Entity Name         Federal ID Number         Location           ACME Lending         99-9999924         15 N Market St	Web Address
Home / ACME Lending / Application for a Consumer Discou	nt New License
Step 1 License	
Requirements	Contacts Save
General Details	Please provide the following information about the required contact types: Licensing Contact, Examination Contact, Compliance Contact, Consumer Services Contact, Billing Contact
License D/B/As	··· Copy Existing Contact Add Contact
Financial Documents	
Branch Manager	C Previous
Contacts	
Affirmation	

Do Not Use Call Center telephone numbers for your Contact Information



- 2. Once all the information regarding the license application has been entered, the user will have to affirm the information on the [Affirmation] section. The Name entered will serve as the electronic signature. Click on the [Finalize Application and Proceed to Cart] button to proceed.
- 3. [Step 2 Submit & Pay] screen will then be launched.

When an application is submitted to DOBS, all information will be locked. Prior to submission, the user should make sure that all information is complete, true and correct as it is subject to the penalties.

Self-Service Program Selection		DoBS	Portal	Welcome, Robert Drake Logout
Application				
	Location Web Address			
Home / ACME Lending / Application				
Step 1 License	o2 omit & Pay			
Submit And Pay				
Description	Quantity	Unit Price Amount		
Application Fee				
		Total Amount Due		
You will be redirected to the secure Payeezy to Submit and Proceed to Payment	payment gateway for paying any outstanding	fee(s). Payeezy.		

When the user clicks on [Submit and Proceed to Payment], the user will be redirected to a thirdparty vendor – Payeezy – where they will enter their payment information.

Once the payment goes through, the user will be redirected back to the Non-Depository dashboard.



# Applying for a License – Consumer Discount Company Branch

The steps required to apply for a branch license are the same as applying for the initial location.

1. After selecting "Consumer Discount Company Branch" as the License Type and the location associated with it on the [Apply for a License] screen, the [Application for a Consumer Discount Company Branch New License] screen will be launched. Consumer Discount Company Branch license requires the selection of a [Parent License]

ACME Lending		
Federal ID Number Web Address		
99-999924		
Home / ACME Lending / Apply for a Lid	bense	
	Apply for a License	
License Type *	Consumer Discount Company Branch	
Parent License *		
	Consumer Discount New License Application #34576 at 17 N 2nd St	
Location *		
	Cancel Submit	

#### Note:

- 1. If the branch address was not added when the entity was created, you will need add the location. Select the entity from the Entity Dashboard and click [Open].
- 2. Click [Add Location] to begin.
- 3. Only 1 location may be designated as the headquarters location. After entering the location information, click [Submit]

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*



# **Applying for a License – Credit Services Loan Broker**

 After selecting "Credit Services Loan Broker" as the License Type and the location associated with it on the [Apply for a License] screen, the [Application for a Credit Services Loan Broker New License] screen will be launched. There are 2 Steps – Step 1 License and Step 2 Submit & Pay.

The form will need to be filled out and will have 5 sections – General Details, License DBA's, Agents, Lenders, Contacts and Affirmation. Required fields will have a \* beside them.

#### [General Details] section

Self-Servi	rice Program Selection			D	oBS Portal		Welcome, Robert Drake Logout
Application	on for a Cre	dit Servi	ices Loan Brok	er New Lice	nse		
Entity Name ACME Lending		Location 1 Main St	Web Address				
Home / ACME L	ending / Application for	a Credit Services I	Loan Broker New License				
Step 1 License	Sub	2 omit & Pay					
General Details			al Details			🖺 Save	
Agents		List the type	es of loan broker services offered t	to consumer by the loan br	roker.*		
Lenders							
Contacts							
Affirmation							
						ĥ	
						Next >	

#### [License D/B/As] Section

When applying for Credit Services Loan Broker Registration please select any DBA's that will be associated with this license by clicking the checkbox next to the appropriate name.

Applicatio	on for a Cre	edit Servic	es Loan Broker N	ew License		
Entity Name	Federal ID Number	Location	Web Address			
ACME Lending	99-9999924	17 N 2nd St				
Home / ACME Le	nding / Application for	r a Credit Services Loai	Broker New License			
Step 1 License	Sul	o 2 bmit & Pay				
General Details		Licens	e D/B/As			🖺 Save
License D/B/As		Please selec	t applicable D/B/As			
Agents			Name		Fictitious Name Registration Document	
Lenders			This is my test DBA		TEST ATTACHMENT.docx	
Branch Manager						
Contacts		< Previou:				Next >
Affirmation						



#### [Agents] section

Application	on for a Cr	edit Servic	ces Loan Broker New License	
Entity Name	Federal ID Number	Location	Web Address	
ACME Lending	99-9999924	17 N 2nd St		
Home / ACME L	ending / Application f	or a Credit Services Loa	an Broker New License	
Step 1 License		ep 2 Ibmit & Pay		
General Details		Agent	ts 🗈 Save	e
License D/B/As		Identify na	ames and addresses of all agents and employees of the loan broker who act or will act as a loan broker on behalf of the loan broker. Section 8(d)	
Agents		Add Age	nt -	
Lenders				
Branch Manager		Previou	Next 3	
Contacts				
Affirmation				

You can add one or more agents by clicking on the [Add Agent] button and then completing the add agent form for each of them.

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*

#### [Lenders] section

Application for a C	redit Services Loan Broker New License	
Entity Name Federal ID Numbe	r Location Web Address	
ACME Lending 99-9999924	17 N 2nd St	
Home / ACME Lending / Application	for a Credit Services Loan Broker New License	
License	tep 2 Submit & Pay	
General Details	Lenders	ave
License D/B/As	List the name, address, and telephone number of all loan brokers or lenders on who behalf the applicant acts or will act.	
Agents	Add Lender	
Lenders		
Branch Manager	Previous	kt 🔪
Contacts		
Affirmation		

You can add one or more lenders by clicking on the [Add Lender] button and then completing the add lender form for each of them.

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*



#### [Contacts] Section

The [Copy Existing Contact] allows the user to get information that was previously entered in the [Contacts] Section or the [Entity Officers] and copy it into the license application. \*\*Please take note of the Country designation, it is defaulted to United States.\*\*

Self-Service Program Selection	DoBS Portal Welcome. Robert I	Drake Logout
Application for a Cred	dit Services Loan Broker New License	
	Address Main St	
Home / ACME Lending / Application for a	Credit Services Loan Broker New License	
Step 1 License	nit & Pay	
General Details	Contacts	
Agents	Please provide the following information about the required contact types: Licensing Contact Copy Existing Contact Add Contact	
Lenders	··· Copy Existing Contact	
Contacts	<pre> Vext3</pre>	
Affirmation	Virenus Reit 2	

2. Once all the information regarding the license application has been entered, the user will have to affirm the information on the [Affirmation] section. The Name entered will serve as the electronic signature. Click on the [Finalize Application and Proceed to Cart] button to proceed.

### Do Not Use Call Center telephone numbers for your Contact Information

Self-Service Program Selection	DoBS Portal Welcome, Robert Drake Logout
Application for a Cre	edit Services Loan Broker New License
Entity Name Federal ID Number ACME Lending 45-4574747	Location Web Address 1 Main St
Home / ACME Lending / Application fo	a Credit Services Loan Broker New License
Step 1 License	22 bmit & Pay
General Details	Affirmation
Agents	Inderstand by submitting this Credit Services Loan Broker Company Application: I am agreeing to be bound by the following declaration: 'I declare that all of my answers on this Credit Services Loan Broker Application are complete, true and correct. I make this declaration subject to the
Lenders	penalties of 18 PA.C.S. § 4904 relating to unsworm falsification to authorities." * I attest that I have read and understand the following (click each for link):
Contacts	1. Credit Services Loan Broker Act 2. Title 10, Pennsylvania Code, Chapter 42
Affirmation	Enter Name Below
	Finalize Application and Proceed to Cart
	€ Previous

3. [Step 2 – Submit & Pay] screen will then be launched.



When an application is submitted to DOBS, all information will be locked. Prior to submission, the user should make sure that all information is complete, true and correct as it is subject to the penalties.

Self-Service Program Selection		DoB9	Portal	Welcome, Robert Drake Logout
Application				
Entity Name         Federal ID Number         Location           ACME Lending         45-4574747         1 Main St	Web Address			
Home / ACME Lending / Application				
Submit And Pay				
Description	Quantity Unit	Price Amount		
Application Fee You will be redirected to the secure Payeezy payment gateway! Submit and Proceed to Payment	or paying any outstanding fee(s).	Total Amount Due		

When the user clicks on [Submit and Proceed to Payment], the user will be redirected to a thirdparty vendor – Payeezy – where they will enter their payment information.

Once the payment goes through, the user will be redirected back to the Non-Depository dashboard.



# **Applying for a License – Installment Seller**

1. After selecting "Installment Seller" as the License Type and the location associated with it on the [Apply for a License] screen, the [Application for an Installment Seller New License] screen will be launched. There are 2 Steps – Step 1 License and Step 2 Submit & Pay.

The form has 6 sections – Requirements, General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

The Requirement section outlines all the requirements needed to apply for and maintain a license.

Please complete the General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

#### [General Details] section

Application	for a Ins	stallment	Seller New License
-	deral ID Number 9999924	Location 17 N 2nd St	Web Address
Home / ACME Lending	g / Application fo	or a Installment Seller	New License
Step 1 License	Ste Su	<sup>ip 2</sup> Ibmit & Pay	
Requirements		Gene	ral Details
General Details		contender	officers, directors, owners, partners or members and any managers identified on this application ever been convicted of, pled guilty to, or pled nolo re (no contest) or given a diversionary sentence in lieu of conviction to any felony in this Commonwealth or anywhere else? Section 6217(a)(3) of the
License D/B/As Branch Manager		Consumer O Yes C	r Credit Code. * O No
Contacts			e past ten (10) years, has the applicant or applicant's affiliate, owner, partner, member, officer, director, employee or agent pleaded guilty to, entered a lo contendere (no contest) to or been convicted of a violation under Section 6271 (relating to operating without a license) or subsection A of section
Affirmation		37 of the fo	ormer act known as the Motor Sales Finance Act? Section 6217(b)(2) of the Consumer Credit Code? * ) No
		Do you pro O Yes	ovide or arrange financing for Manufactured Homes? * ) No
		Has the ap O Yes	oplicant, as shown in Question #1, entered into any installment sale contracts prior to applying for an Installment Seller license? * ) No
		instituted,	legal proceedings involving consumer protection, usury, lending, real estate, licensing violations, breach of judiciary duty, fraud or similar issues been continued or concluded against the licensee? *
		O Yes C	) No





#### [License D/B/As] Section

When applying for Installment Seller License please select any DBA's that will be associated with this license by clicking the checkbox next to the appropriate name.

Applicatio	on for a Ins	stallment S	eller New Licer	ise		
Entity Name	Federal ID Number	Location	Web Address			
ACME Lending	99-9999924	17 N 2nd St				
Home / ACME Le	nding / Application fo	r a Installment Seller N	ew License			
Step 1 License	Su	<sup>p 2</sup> bmit & Pay				
Requirements		Licens	e D/B/As			🖺 Save
General Details		Please selec	t applicable D/B/As			
License D/B/As			Name	Fi	ictitious Name Registration Document	
Branch Manager			This is my test DBA		TEST ATTACHMENT.docx	
Contacts						
Affirmation		Previous				Next 🕽

[Branch Manager] Section

Each licensed location requires a designated Branch Manager who is in charge of and responsible for the business operations of the branch location.

Complete the Branch Manager form and Click [Next] to move to Contacts. Please take note of the Country designation, it is defaulted to United States.\*\*

Applica	ation for a In	stallmen	t Seller New Licen	se				
Entity Name	Federal ID Numbe	r Location	Web Address					
ACME Lending	99-9999324	17 N 2nd St	<b>a</b>					
Home / AC	ME Lending / Application	for a Installment Se	ler New License					
Lice	nse 📕 s	tep 2 Jubmit & Pay						
Requirement	:5		Branch Ma	nager				😰 Save
General Detai	ils		The Department of	Banking and Securities requires all ap	plicants to provide both National Criminal History Record	Information (fingerprint cards) and Pennsyli	vania Criminal Record Checks for all officers, direc	tors, owners, partners or
License D/B//	15				ne Consumer Credit Code. These forms must be complete nust be completed along with license applications. It is als			agers, and officers. Criminal
Branch Mana			First Name *			Last Name *		
Contacts			First Name			Last Name		
			Middle Name	Middle Name				
Affirmation			Middle Name					
			Title *			Suffix		
			Title			Suffix		
			Social Security Nu	nber*		Date of Birth *		
			Social Security Nu	mber		Date Of Birth		<b>m</b>
			Home Phone Num	ber		Cell Phone Number*		
			Home Phone Nur	hber		Cell Phone Number		
			Email Address *					
			Email					
			Country *					
			United States					~
			Street Address *					
			Street and number					
			Apartment, suite,	unit, building, floor, etc.				
			City *					
			City					
			Zip / Postal Code *		State / Province *		County *	
			Zip / Postal Code			~		~



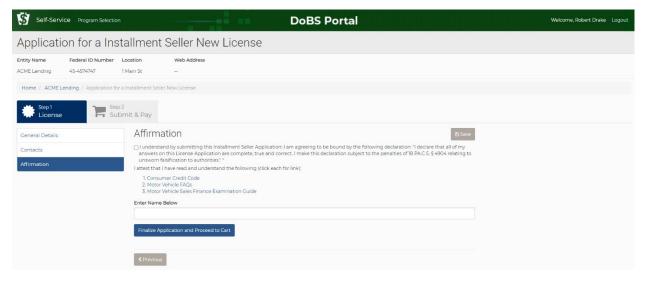
#### [Contacts] Section

The [Copy Existing Contact] allows the user to get information that was previously entered in the [Contacts] Section or the [Entity Officers] and copy it into the license application. \*\*Please take note of the Country designation, it is defaulted to United States.\*\*

Self-Service Program Selection		DoBS Portal		Welcome, Robert Drake Logout
Application for a Insta	Ilment Seller New License			
	cation Web Address Iain St			
Home / ACME Lending / Application for a In	istallment Seller New License			
Step 1 License	it & Pay			
General Details	Contacts		图 Save	
Contacts	Please provide the following information about the required cont	- (7) · (7)		
Affirmation		<ul> <li>Copy Existing Contact</li> </ul>	Add Contact	
	≮ Previous		Next >	

### Do Not Use Call Center telephone numbers for your Contact Information

2. Once all the information regarding the license application has been entered, the user will have to affirm the information on the [Affirmation] section. The Name entered will serve as the electronic signature. Click on the [Finalize Application and Proceed to Cart] button to proceed.





3. [Step 2 – Submit & Pay] screen will then be launched.

When an application is submitted to DOBS, all information will be locked. Prior to submission, the user should make sure that all information is complete, true and correct as it is subject to the penalties.

Self-Service Program Selection		DoB9	S Portal		Welcome, Robert Drake Logout
Application					
Entity Name         Federal ID Number         Location           ACME Lending         45-4574747         1 Main S					
Home / ACME Lending / Application					
Step 1 License Step 2 Submit &	Pay				
Submit And Pay					
Description	Quantity	Unit Price Amount			
Application Fee					
		Total Amount Due			
You will be redirected to the secure Payeezy payment	gateway for paying any outstanding	i fee(s). Payeezy Port Data Power			
Submit and Proceed to Payment					

When the user clicks on [Submit and Proceed to Payment], the user will be redirected to a thirdparty vendor – Payeezy – where they will enter their payment information.

Once the payment goes through, the user will be redirected back to the Non-Depository dashboard.



# **Applying for a License – Retail Grocery Store Check Casher**

 After selecting "Retail Grocery Store Check Casher" as the License Type and the location associated with it on the [Apply for a License] screen, the [Application for a Retail Grocery Store Check Casher New License] screen will be launched. There are 2 Steps – Step 1 License and Step 2 Submit & Pay.

The form has 6 sections – Requirements, General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

The Requirement section outlines all the requirements needed to apply for and maintain a license.

Please complete the General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

#### [General Details] section

Applicatio	on for a Re	tail Groce	ery Store Check Casher New License	
Entity Name	Federal ID Number	Location 17 N 2nd St	Web Address	
Home / ACME Le	nding / Application fo	or a Retail Grocery Sto	ore Check Casher New License	
Step 1 License	Survey Stee	<sup>p 2</sup> bmit & Pay		
Requirements		Gene	ral Details	🖹 Save
General Details		Are you a (P.L. 421, 1	n Retail Food Store licensed/registered as a food establishment as defined in Section 2 of the Food Act No 70)? *	
License D/B/As		O Yes C	ON C	
Branch Manager			I Retail Food Store licensed/registered as a public eating or drinking place as defined in Section 1 of the ting and Drink Place Law (P.L. 926, No. 369)? *	
Contacts		O Yes C	O NO	
Affirmation			ce with local zoning laws: Provide a signed statement by the applicant that the applicant is operating mpliance with all local zoning laws and laws pertaining to the operation of a business in this wealth.	
		Attach F	File	
			um file size per attachment: 300 MB.	
			ce with Municipal and County Ordinances: Provide a signed statement by the applicant that the t has complied with all applicable municipal and county ordinances or requirements for doing business.	
		Attach F		
		Retail Foo	um file size per attachment: 300 MB. od Store License/Registration: Provide copy of License or Registration as an Eating or Drinking Place or stablishment Food Store. * File	



#### [License D/B/As] Section

When applying for Retail Grocery Store Check Casher license please select any DBA's that will be associated with this license by clicking the checkbox next to the appropriate name.

Self-Service Program Selection		DoBS Portal	
Application for a Retail	Grocery Store Check	Casher New License	
Entity Name         Federal ID Number         Local           ACME Lending         99-9999924         17 N	tion         Web Address           2nd St		
Home / ACME Lending / Application for a Ret	tail Grocery Store Check Casher New License		
Step 1 License	: & Pay		
Requirements	License D/B/As		🖺 Save
General Details	Please select applicable D/B/As		
License D/B/As	Name	Fictitious Name Registration Document	
Branch Manager	This is my test DBA	TEST ATTACHMENT.docx	
Contacts			
Affirmation	Previous		Next >

#### [Branch Manager] Section

Each licensed location requires a designated Branch Manager who is in charge of and responsible for the business operations of the branch location.

Complete the Branch Manager form and Click [Next] to move to Contacts. Please take note of the **Country** designation, it is defaulted to United States.\*\*

Application for a Retail Grocery Store Check Casher New License						
Entity Name	Federal ID Number	Location	Web Address			
ACME Lending	99-9999924	17 N 2nd St				
Home / ACME Le	nding / Application f	or a Retail Grocery S	ore Check Casher New License			
Step 1 License		ap 2 Jbmit & Pay				
Requirements		Bran	ch Manager			P Save
General Details		First Nar	ne *		Last Name *	
License D/B/As		First Na	me		Last Name	
License D/B/As		Middle N	ame			
Branch Manager		Middle	Name			
Contacts		Title *			Suffix	
Affirmation		Title			Suffix	
		Social Se	curity Number *		Date of Birth *	
		Social S	ecurity Number		Date Of Birth	*
		Home Pl	one Number		Cell Phone Number *	
		Home	Phone Number		Cell Phone Number	
		Email Ac	dress *			
		Email	Sear	ch		



[Contacts] Section

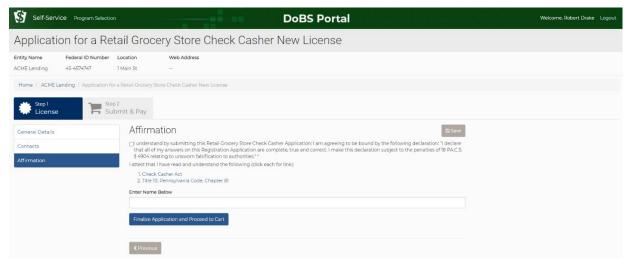
The [Copy Existing Contact] allows the user to get information that was previously entered in the [Contacts] Section or the [Entity Officers] and copy it into the license application.

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*

### Do Not Use Call Center telephone numbers for your Contact Information

Self-Service Program Selection	DoBS Portal Welcome Robert Drake Logout
Application for a Reta	il Grocery Store Check Casher New License
	cation Web Address tein St
Home / ACME Lending / Application for a R	letail Grocery Store Check Casher New License
Step 1 License	ilt & Pay
General Details	Contacts & Save
Contacts	Please provide the following information about the required contact types: Licensing Contact, Examination Contact, Compliance Contact, Consumer Services Contact, Billing Contact
Affirmation	Copy Existing Contact
	< Previous Next >

2. Once all the information regarding the license application has been entered, the user will have to affirm the information on the [Affirmation] section. The Name entered will serve as the electronic signature. Click on the [Finalize Application and Proceed to Cart] button to proceed.





3. [Step 2 – Submit & Pay] screen will then be launched.

When an application is submitted to DOBS, all information will be locked. Prior to submission, the user should make sure that all information is complete, true and correct as it is subject to the penalties.

Self-Service Program Selection		DoBS	Portal	Welcome, Robert Drake Logout
Application				
Entity Name         Federal ID Number         Location           ACME Lending         45-4574747         1 Main S				
Home / ACME Lending / Application				
Step 1 License	Pay			
Submit And Pay				
Description	Quantity Unit	ice Amount		
Application Fee				
You will be redirected to the secure Payeezy payment	asteway for paying any outstanding fee(s)	Total Amount Due		
Submit and Proceed to Payment	gaverag ior paying only outstanding recty.	First Data Provend		

When the user clicks on [Submit and Proceed to Payment], the user will be redirected to a thirdparty vendor – Payeezy – where they will enter their payment information.

Once the payment goes through, the user will be redirected back to the Non-Depository dashboard.



# Applying for a License – Retail Grocery Store Check Casher Branch

The steps required to apply for a branch license are the same as applying for the initial location.

Self-Service Program Selectio	DoBS Portal	
ACME Lending		
Federal ID Number     Web Address       99-9999924		
Home / ACME Lending / Apply for a Lie	zense and a second s	
	Apply for a License	
License Type *	Retail Grocery Store Check Casher Branch	~
Parent License *		~
	Required when a branch license is selected. In order to apply for a branch license, an existing primary license or pending license application must be selected.	
Location *		•
	Cancel Submit	

Note:

- 1. If the branch address was not added when the entity was created, you will need add the location. Select the entity from the Entity Dashboard and click [Open].
- 2. Click [Add Location] to begin.
- 3. Only 1 location may be designated as the headquarters location. After entering the location information, click [Submit]

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*



## **Applying for a License – Sales Finance**

 After selecting "Sales Finance" as the License Type and the location associated with it on the [Apply for a License] screen, the [Application for a Sales Finance New License] screen will be launched. There are 2 Steps – Step 1 License and Step 2 Submit & Pay.

The form has 6 sections – Requirements, General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

The Requirement section outlines all the requirements needed to apply for and maintain a license.

Please complete the General Details, License D/B/A, Branch Manager, Contacts and Affirmation. Required fields will have a \* beside them.

#### [General Details] section

Application for a Sales	Finance Company New License
Entity Name         Federal ID Number         Loca           ACME Lending         99-9999924         17 N	xtion         Web Address           2nd St.
Home / ACME Lending / Application for a Sal	es Finance Company New License
Step 1 License	t & Pay
Requirements	General Details
Ceneral Details	Have any officers, directors, owners, partners or members and any managers identified on this application ever been convicted of, pled guilty to, or pled nolo contendere (no contest) or given a diversionary sentence in lieu of conviction to any felony in this Commonwealth or anywhere else? Section 6277(a)(3) of the
License D/B/As	Consumer Credit Code.*
Branch Manager	O Yes O No
Contacts	Within the past ten (10) years, has the applicant or applicant's affiliate, owner, partner, member, officer, director, employee or agent pleaded guilty to, entered a plea of nolo contender (no contest) to or been convicted of a violation under Section 6271 (relating to operating without a license) or subsection A of section 37
Affirmation	of the former act known as the Motor Vehicle Sales Finance Act? Section 6217(b)(2) of the Consumer Credit Code. * O Yes O No
	Have any legal proceedings involving consumer protection, usury, lending, real estate, licensing violations, breach of judiciary duty, fraud or similar issues been instituted, continued or concluded against the licensee? *
	O Yes O No
	Do you service or hold installment sales contracts for manufactured homes? * O Yes O No
	Bond Information



#### [License D/B/As] Section

When applying for Sales Finance license please select any DBA's that will be associated with this license by clicking the checkbox next to the appropriate name.

Self-Service	Program Selection			DoB9	5 Portal	
Applicatio	n for a Sa	les Financ	e Company N	New License		
	Federal ID Number 99-9999924	Location 17 N 2nd St	Web Address			
Home / ACME Lend	ding / Application fo	r a Sales Finance Comp	any New License			
Step 1 License	Ste Su	o 2 bmit & Pay				
Requirements		Licens	e D/B/As			🖺 Save
General Details		Please selec	t applicable D/B/As			
License D/B/As			Name		Fictitious Name Registration Docum	ent
Branch Manager			This is my test DBA		TEST ATTACHMENT.docx	
Contacts						
Affirmation		Previous				Next >

#### [Contacts] Section

The [Copy Existing Contact] allows the user to get information that was previously entered in the [Contacts] Section or the [Entity Officers] and copy it into the license application. \*\*Please take note of the Country designation, it is defaulted to United States.\*\*

### Do Not Use Call Center telephone numbers for your Contact Information

Self-Service Program Selection	DoBS Portal Welcome, Robert Drake	Logout
Application for a Sale	es Finance Company New License	
	Location Web Address	
Home / ACME Lending / Application for a	a Saliss Finance Company New License	
Step 1	2 mit & Pay	
General Details	Contacts BSive	
Contacts	Please provide the following information about the required contact types: Licensing Contact, Examination Contact, Compliance Contact, Consumer Services Contact, Billing Contact	
Affirmation	Copy Existing Contact Add Contact	
	< Previous Next >	



2. Once all the information regarding the license application has been entered, the user will have to affirm the information on the [Affirmation] section. The Name entered will serve as the electronic signature. Click on the [Finalize Application and Proceed to Cart] button to proceed.

Self-Service Program Selection		DoBS Portal		Welcome, Robert Drake Logout
Application for a Sal	es Finance Company Nev	v License		
	Location Web Address			
Home / ACME Lending / Application for	a Sales Finance Company New License			
Step 1 License	2 mit & Pay			
General Details	Affirmation		🗈 Save	
Contacts	answers on this Sales Finance Application are co	pplication: I am agreeing to be bound by the following declara omplete, true and correct. I make this declaration subject to the		
Affirmation	relating to unsworn falsification to authorities." I attest that I have read and understand the follow			
	1. Consumer Credit Code 2. Motor Vehicle FAQs 3. Motor Vehicle Sales Finance Examination Gu	ide		
	Enter Name Below			
	Finalize Application and Proceed to Cart			
	< Previous			

3. [Step 2 – Submit & Pay] screen will then be launched.

When an application is submitted to DOBS, all information will be locked. Prior to submission, the user should make sure that all information is complete, true and correct as it is subject to the penalties.

Self-Ser	vice Program Selection			DoBS Portal	Welcome, Robert Drake Logout
Applicat	ion				
Entity Name ACME Lending		cation Web Address fain St			
Home / ACME	Lending / Application				
Step 1 License	e Subm	nit & Pay			
Submit Ar	nd Pay				
Description Application Fee		Quantity	Unit Price	Amount	
Application Fee			Total An	rount Due	
You will be redirect	ted to the secure Payeezy pay	ment gateway for paying any outstandi	ng fee(s).	Payeezy. Pre bras Powered	
Submit and Pro	oceed to Payment				

When the user clicks on [Submit and Proceed to Payment], the user will be redirected to a thirdparty vendor – Payeezy – where they will enter their payment information.

Once the payment goes through, the user will be redirected back to the Non-Depository dashboard.



# **Viewing Applications**

The DOBS Portal enables the user to view the status of the application. On the Entity Dashboard, the user can go to the [Active Applications] section to see the status of an existing application.

Test Entity 2 Name C	Change				Entity Actions 🗸
Federal ID Number         Web Address           77-7777777					
Home / Test Entity 2 Name Change					
Pending Tasks	Active Applicat	ions			
Active Applications	Completed Applications				
Identification	Application Number	Application Type	Application Status	Date Submitted	
Locations	10084	License Contacts Amendment	In-Progress	10/15/2020 09:42 am	View Withdraw
Entity Officers	<< < 1 > >>				
Books and Records					
User Management					

# **Withdraw License Applications**

The DoBS Portal will allow a user to withdraw and active application by clicking the [Withdraw] button on the application they wish to withdraw.

You will need to give a reason for the withdrawal and confirm by click on [Withdraw Application]

Withdraw Applicat	ion ×
Withdraw Reason *	Write Reason for Withdrawing Application
	Cancel Withdraw Application



# **Discard License Applications**

The DOBS Portal enables the user to discard a saved application. On the Non-Depository Dashboard, the user can go to the [Draft License Applications] section and click on the [Discard] button.

Self-Service Program Selection	DoB	S Portal		Welcome, Robert Drake Logout
Non-Depository				Actions 🔻
Pending Tasks				
My Entities				
Entity Name ACME Lending	Federal ID Number 45-4574747	Status Registered		Open
Draft License Applications				
Entity Name ACME Lending	Federal ID Number 45:4574747	Application Type Consumer Discount New License	Last Modified 08/31/2020 11:04 am	Discard Open



### **Accessing License Information**

The DOBS Portal enables the user to view license information as well as retrieve a copy of the License Certificate. On the Entity Dashboard, the user can go to the [Locations] section and on the Location and License, click on the [Open] button.

Self-Service Program Selection			DoBS Portal			Welcome, Robert Drake Logou
ACME Lending						Entity Actions 🗢
Federal ID Number Web Address 45-4574747						
Home / ACME Lending						
Pending Tasks	Locations					
Active Applications	Address 1 Main St		License	Number	Status	
Identification	Harrisburg, PA 1 Dauphin	7101	Collector Repossesso	1	Approved	Open
Locations	Phone 717-877-8777	Fax	Installment Seller	2	Approved	Open
Entity Officers	Headquarters					
Books and Records						
User Management						

The user will then be presented with the License screen. The user can click on the [license\_certificate.pdf] to download the certificate.

Self-Service Program Selection		DoBS Portal		Welcome, Robert Drake Logout
ACME Lending				License Actions 🕶
License Type License Number Collector Repossessor 1	Status Original License Date Approved 08/27/2020			
Home / ACME Lending / License #1 - Collector Repossesso	or:			
General Information	General Information			
License Bonds	License Type	Collector Repossessor		
Certificate History	License Number	1		
License Contacts	Status	Approved		
Collector Repossessors	Original Issue Date	08/27/2020		
	Original License Number			
	NMLS Entity ID	1000		
	NMLS Transition Date	**		
	SAP Account Number			
	D/B/A(s)	Name	Fictitious Name Registration Document	
		License has	no D/B/A registrations.	
	Location	1 Main St Harrisburg, PA 17101		
	License Certificate	license_certificate.pdf		
		Effective Date 08/27/2020 - 09/30/2020		
	Next Exam Date	Not Scheduled		
	License History	Status	Effective Date *	
		Approved	08/27/2020 03:17 pm	



### **Surrendering A License**

The DOBS Portal enables the user to surrender the license. On the Entity Dashboard, the user can go to the [Locations] section and on the Location and License, click on the [Open] button.

Click on [License Actions] in the upper right-hand corner. Select [Surrender License].

Welcome	e, John Test Logout
	License Actions 🗸
Apply to E	dit Branch Manager
Apply to E	dit Contacts
Apply to E	dit Address
Surrender	License

#### Complete the requested information and any required documents.

Surrender License	
Effective Date of Surrender *	Date of Surrender
Reason for license surrender *	Please provide reason for license surrender.
Upload attachments	Please Attach the following information on the status of each loan to Pennsylvania consumers that are outstanding: - Name of Consumer - Consumer Address and telephone number - Current Application Status - Loan Number - Annount of Loan - Contact information for applicable lender with who each loan will be placed - Date loan will be resolved
Licenses to Surrender:*	Attach Files
Affirmation *	□ I understand by submitting this Surrender License Application: I am agreeing to be bound by the following declaration: I declare that all of my answers on this License Application are complete, true and correct. I make this declaration subject to the penalties of 18 PA.C.S. § 4904 relating to unsworn falsification to authorities.**
	Enter Name Below
	Cancel Submit



# Apply to Add/Edit/Remove a Contact

The DoBS portal will allow you to apply to edit, add or remove a contact for a licensed location. This can be done from the [License] screen.

On the Entity Dashboard, the user can go to the [Locations] section and on the Location and License, click on the [Open] button.

Click on [License Actions] in the upper right-hand corner. Select [Apply to Edit Contacts].

### Do Not Use Call Center telephone numbers for your Contact Information

Welcome, John Test Logout
License Actions 🔻
Apply to Edit Branch Manager
Apply to Edit Contacts
Apply to Edit Address
Surrender License

[Contacts] Section

The [Remove] allows the user the remove the existing contact.

The [Copy Existing Contact] allows the user to get information that was previously entered in the [Contacts] Section or the [Entity Officers] and copy it into the license application.

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*

Apply to Edit Contacts			
	Please provide the following information about the required contact types: Licer	nsing Contact, Exami	ination Contact, Compliance Contact, Consumer Services Contact, Billing Contact
	-		✓ Copy Existing Contact Add Contact
	Contact		Copy
	Contact Type *		Title •
	Billing Contact	~	President

After all additions/changes have been completed you will need to affirm to the edits by clicking on the [Affirmation] checkbox and then entering your name.



Click [Submit] to send your request to DoBS for review.

The application will be reviewed by DoBS and a response will be sent once a decision has been made.

Document Upload
Upload any other relevant documents
Attach Files
Affirmation *
I understand by submitting this License Contacts Change Application: I am agreeing to be bound by the following declaration: "I declare that all of my answers on this License Application are complete, true and correct. I make this declaration subject to the penalties of 18 PA.C.S. § 4904 relating to unsworn falsification to authorities."*
Enter Name Below
Cancel Submit



## **Accessing Entity Officers**

The DoBS portal will allow you to apply to edit/remove an officer for an entity. This can be done from the [Entity Officer] screen.

est Entity 2 Name	Change				Entity Actions
ederal ID Number Web Address					
Home / Test Entity 2 Name Change					
Pending Tasks	Entity Officers				
Active Applications	First Name Seymore	Last Name Beaches	<b>Email</b> sdick@pa.gov	Residential Address 17 N 2nd St Harrisburg, PA 17101	🕼 Apply To Edit
Locations	Home Phone Number	Cell Phone Number	Title	Officer Type	
Entity Officers	444-555-1478	444-555-1478	President	Control Person	
Books and Records User Management	First Name Buffy	Last Name Summers	<b>Email</b> sdick@pa.gov	Residential Address 17 N 2nd St Harrisburg, PA 17101	Gt Apply To Edit
	Home Phone Number	Cell Phone Number	Title	Officer Type	
	444-555-1478	444-555-1478	Vice President	Control Person	

# Apply to Edit Entity Officer

To Edit/Remove an entity officer click on

C Apply To Edit

next to the officer you want to work on.

#### Please note: Do Not use the edit function to add a new officer.

To remove the officer, click on the [Officer is being removed] and click [Submit].

Apply to Edit Officer							
	Please provide the following information about the officer, director, owner, partners, member or manager of the entity.						
	ranch Manager: A person that must meet certain requirements and is responsible for the actions of the company.						
	Control Person - A control person is an individual (natural person) that directly or indirectly exercises control over the applicant or licensee. This definition includes any individual that is an equity owner or member, executive officer or individuals, regardless of tible, who have the power directly or indirectly to direct the management or policies of a company.						
	Entity Officer						
	Effective Date of Change *						
	Effective Date of Change	#	Officer is being removed				
	Officer Type *		Title *				
	Control Person	~	Member				
	EIN/Fed ID		First Name *				
			Seymore				

To edit the officer, make necessary changes to the screen and then click [Submit].

Fields that cannot be edited:

- Social Security Number
- Date of Birth



### Test Entity 2 Name Change

Federal ID Number	Web Address			
Home / Test Entit	ty 2 Name Chang	e / Apply to Edit Officer		
Apply to Ed	it Officer	Please provide the following information about the officer, director, owner,	partne	ers, member or manager of the entity.
		Entity Officer		
		Effective Date of Change		Officer is being removed
		Officer Type *		Title •
		Control Person	~	President
		First Name *		Last Name *
		Seymore .		Beaches
		Middle Name		
		Middle Name		
		Social Security Number *		Date of Birth *
		889-98-9785		01/02/1900
		Home Phone Number *		Cell Phone Number *
		444-555-1478		444-555-1478
		Email Address *		
		sdick@pa.gov		

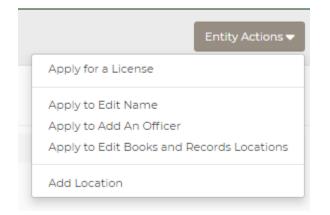
After all additions/changes have been completed you will need to affirm the information by clicking on the [Affirmation] checkbox and then entering your name.

Click [Submit] to send your request to DoBS for review.

The application will be reviewed by DoBS and a response will be sent once a decision has been made.

## **Apply Add an Entity Officer**

The Portal gives you the ability to add a new officer by clicking on the [Entity Actions] button and then selecting [Apply to Add an Officer] from the dropdown menu.





After the new officer has been added, you will need to affirm to the edits by clicking on the [Affirmation] checkbox and then entering your name. If needed, please complete all criminal history requirements.

Click [Submit] to send your request to DoBS for review.

The application will be reviewed by DoBS and a response will be sent once a decision has been made.



# **Accessing Entity Books and Records**

The DoBS portal will allow you to apply to edit/remove a Books and Records for an entity. This can be done from the [Books and Records] screen.

Test Entity 2 Nam	ne Change				Entity Actions
Federal ID Number     Web Address       77-7777777					
Home / Test Entity 2 Name Change	2				
Pending Tasks	Entity Officers				
Active Applications	First Name Seymore	Last Name Beaches	<b>Email</b> sdick@pa.gov	<b>Residential Address</b> 17 N 2nd St Harrisburg, PA 17101	🕼 Apply To Edit
Locations	Home Phone Number	Cell Phone Number	Title	Officer Type	
Entity Officers	444-555-1478	444-555-1478	President	Control Person	
Books and Records	First Name Buffy	Last Name Summers	<b>Email</b> sdick@pa.gov	<b>Residential Address</b> 17 N 2nd St Harrisburg, PA 17101	🕼 Apply To Edit
Oser Management	Home Phone Number	Cell Phone Number	Title	Officer Type	
	444-555-1478	444-555-1478	Vice President	Control Person	

# **Apply to Edit Entity Books and Records**

To Edit/Remove and entity Books and click on the [Entity Actions] button and select [Apply to Edit Books and Records] from the drop-down menu.

	Entity Actions 🗸
App	ly for a License
Арр	ly to Edit Name
App	ly to Add An Officer
App	ly to Edit Books and Records Locations
Add	Location

On the Apply to Edit the Books and Records Locations screen you have 3 options, you can edit the existing information, create a new books and records or remove the books and record.

Add a new Books and Record.

Click on [Add Books/Records Address] then complete the information.



Click Here to Download Application Instructions					
Please provide the following information a	bout all address where any offical boo	oks or records related to t	he entity are kept.		
Add Books/Records Address					
Books/Records Address					Remove
Company Name *	CT Corporation Systems				
First Name N/A					
Last Name	N/A				
Phone Number *	888-888-8888		Fax Number	Fax Number	
Email	sdick@pa.gov				
Country *	United States				~
Street Address *	17 Pine St				
	Apartment, suite, unit, building, flo	or, etc.			
City •	Harrisburg				
Zip / Postal Code •	17101	State / Province •	PA		~
County	Dauphin				~
Comments	Description of the records which a	e held at this location.			
Affirmation					
□ I understand by submitting this Entity E all of my answers on this License Applicati falsification to authorities."					
Enter Name Below					
Cancel Submit					

To remove the Books and Record click on the [Remove] button.

To edit the Books and Records make necessary changes to the screen.

After all additions/changes have been completed you will need to affirm to the edits by clicking on the [Affirmation] checkbox and then entering your name.

Click [Submit] to send your request to DoBS for review.

The application will be reviewed by DoBS and a response will be sent once a decision has been made.



## **Apply to Edit Entity Name**

The portal will allow you to apply to change the entity name. This can be done by clicking on [Identification] tap and then clicking on [Entity Actions]. Select [Apply to Edit Name] from the drop-down menu. If the company structure is being amended and the EIN/Federal ID number has changed, a new application must be completed. For example: Test Entity Inc (corporation) with Federal ID #XX-XXXXXX1 is changing to Test Entity LLC (a limited liability company) and still able to use Federal ID #XX-XXXXX1, the name can be amended. But if Test Entity Inc (corporation) with Federal ID #XX-XXXXX1 is changing to Test Entity LLC (a limited liability company) and still able to use Federal ID #XX-XXXXX1, the name can be amended. But if Test Entity Inc (corporation) with Federal ID #XX-XXXXX1 is changing to Test Entity LLC (a limited liability company) and was issued a new Federal ID #XX-XXXXX2, a new application must be completed.

Enter the new company name, attach the Pennsylvania Department of State Registration approval of the name change and a copy of the Operating Agreement or By-Laws that show the name change. Complete the Effective Date of Change and the Affirmation and click [Submit] to send the application to DoBS for review.

Test Entity 2 Name Change					
Federal ID Number     Web Address       77-77777777					
Home / Test Entity 2 Name Change / Edit Name					
Apply to Edit Name					
Do you wish to update Entity Name?	● Yes ○ No				
New Entity Name *	New Entity Name				
Attach Articles of Incorporation	Attach File				
Attach Operating Agreement	Attach File				
Attach By-Laws	Attach File				
Do you wish to update Entity DBAs?	◉ Yes () No				
Current DBAs	DBA Name	Fictitious Name Registration	Registratio	Cancelled	Delete
		Entity has no current DE	3As		
New DBAs	Add a New DBA No New DBAs				
Effective Date of Change *	Effective Date of Chang	ge 🗎			
Affirmation *	<ul> <li>I understand by submitting this Entity Name Change Application: I am agreeing to be bound by the following declaration: "I declare that all of my answers on this License Application are complete, true and correct. I make this declaration subject to the penalties of 18 PA.C.S. § 4904 relating to unsworn falsification to authorities."*</li> </ul>				
	Enter Name Below				
	Cancel Submit				



### Apply to Add or Remove Entity DBA

The Portal will allow you to apply to add or remove a fictitious name (DBA). This can be done by clicking on [Open] on the entity you wish to add or remove a DBA.

### To Add a new DBA

Click on the [D/B/A/ tab, then click [Add a New D/B/A].

Home / DBA TEST ENTITY	
Pending Tasks	D/B/A
Active Applications	Add a New D/B/A
Identification	
D/B/A	
Locations	

Enter the DBA name, attach the approved fictitious name registration from the Pennsylvania Department of State and the date the DBA was approved for use. Click [Add New D/B/A].

You can add multiple DBAs by clicking the [Add a New DBA] button again. Repeat the above process for each new DBA. See [To Add the DBA to the Licenses] to complete the process.

D/B/A Name *		
D/B/A Name		
Fictitious Name Registrat	ion *	
Attach File		
ALLACH FILE		
	tachment: 300 MB.	
Maximum file size per a	tachment: 300 MB.	
Maximum file size per al     Registration Date *	tachment: 300 MB.	
<b>1</b> Maximum file size per a		
Maximum file size per al     Registration Date *		

If the DBA does not display on the page, please refresh (F5) the page.

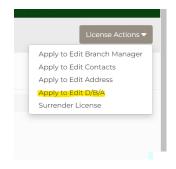


### To Add the DBA to the license(s)

Click on the [Locations] tab; select the license that you wish to add the DBA to, click [Open].

Pending Tasks	Locatio	ns					
Active Applications	Address				License	Number	Status
Identification		Canton, PA 17101 Dauphin			Collector Repossessor	31	Approved Ope
Locations	Phone	555-555-5555	Fax	-1			
Entity Officers	🗒 Headqu	arters					

Click [License Actions], [Apply to Edit D/B/A]



Select the DBA by placing a check in the box next to the DBA that you wish to add to the license. Type in the [Effective Date] of the change, complete the [Affirmation], then click [Submit].

Apply to Ea	dit D/B	3/A		
	Please sele	ct applicable D/B/As		
	Please unse	elect D/B/As that you wish to cancel	from the license	
		DBA Name	Fictitious Name Registration	Registration Date

Please note that the DBA will not appear on the dashboard until it has been approved by the Licensing Office. You will receive an email with a link to print out the new license certificate with the new DBA.



### To Remove a DBA

Click on the [Locations] tab; select the license that you wish to remove the DBA from, click [Open].

Pending Tasks	Locations							
Active Applications	Address	21 Main St			License	Number	Status	
Identification		Canton, PA 17101 Dauphin			Collector Repossessor	31	Approved	Open
Locations	Phone	555-555-5555	Fax	-				
Entity Officers	Headqu	larters						

Select the DBA you wish to remove from the license by unchecking the box next to the DBA. Type in the [Effective Date] of the change, complete the [Affirmation], then click [Submit].

Please se	Please select applicable D/B/As					
Please ur	Please unselect D/B/As that you wish to cancel from the license					
	DBA Name	Fictitious Name Registration	Registration Date			
	New DBA for User Guide	eeyore.docx	03/04/2024			
	Existing Licensee DBA	Police Car.docx	03/26/2024			

Please note that the DBA will not be removed from the license until it has been approved by the Licensing Office. You will receive an email with a link to print out the new license certificate with the DBA removed.



# **Apply to Edit Entity Address**

The portal will allow you to apply to change the entity address. There must be 1 location designated as the headquarters. The address will not show as changed until the Licensing Office approves the [Address Amendment] application.

\*\*Please take note of the Country designation, it is defaulted to United States.\*\*

From the [Entity Dashboard] select the entity and click [Open].

If the license is being move to a new address location, click on the [Locations] tab. Click on [Entity Actions] [Add Location].

Entity Actions 🗸
Apply for a License
Apply to Edit Identification Information
Apply to Add An Officer
Apply to Edit Books and Records Locations
Add Location
Initiate Correspondence
Status
Terminated Failed Open

If you are changing the headquarters location, click [Yes], otherwise click [No].

Country *	United States			~
treet Address *	Street and number, P.O. box,	c/o.		
	Apartment, suite, unit, buildin	ng, floor, etc.		
City *	City			
/ Postal Code *	Zip / Postal Code	State / Province *		~
County	-			~
	Office Phone Number	Office Fax	Office Fax Number	

Enter the new address and click [Submit]. This will add the new address to the drop-down list.

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### **User Guide**

Т

To complete the address change, click on the [Locations] tab. Click [Open] next to the license number that is to be moved to the new address. Click on [License Actions] [Apply to Edit Address].

License Actions 🔻			
Apply to Edit Branch Manager			
Apply to Edit Contacts Apply to Edit Address			
Apply to Edit D/B/A Surrender License			
Entity Name Motor Vehicle Test Entity	Federal ID Number 99-9999901	<b>Status</b> Registered	Open

Select the new location address from the drop-down box, the effective date of the address change, and complete the affirmation and click [Submit] to send the application to DoBS for review.

Current License Address	211 N Delaware Ave
	Ste 100
	Mason City, IA 50401
New Location *	211 N Delaware Ave ×
Effective Date of Change *	
Encetive Date of change	211 N Delaware Ave
	Ste 100
	Mason City, IA 50401
	Headquarters
	11 Pixie Ave
	Dark Forest, PA 17101
	• Maximum file size per attachment: 300 MB. Multiple attachments allowed.
Affirmation *	I understand by submitting this License Address Change Application: I am agreeing to be bound
	by the following declaration: "I declare that all of my answers on this License Application are
	complete, true and correct. I make this declaration subject to the penalties of 18 PA.C.S. A§ 4904 relating to unsworn falsification to authorities."*
	•
	Enter Name Below
	Cancel Submit



# **Pending Tasks**

The DOBS Portal enables the user to respond to tasks that have been assigned to them by the Department. The tasks can be related to licensing, examination, or compliance. Whenever a task is assigned to the Entity, the user will be able to see it on the Non-Depository dashboard – Pending Tasks section.

Self-Service Program Selection	n	DoB	S Portal	We	elcome, Robert Drake Logo
Non-Depository					Actions
Pending Tasks					
Task Name Submit New License Application	License Type Sales Finance	Entity Name ACME Lending	License Number Location	Assigned On 09/01/2020 03:19 pm	Open
My Entities					
Entity Name ACME Lending		Federal ID Number 45-4574747	<b>Status</b> Registered		Open
Draft License Applications	S				
Entity Name ACME Lending		Federal ID Number 45-4574747	Application Type Consumer Discount New License	Last Modified 08/31/2020 11:04 am	Discard Open

The details of the task will be shown once the user clicks on the [Open] button.

Self-Service Program Selection			DoBS Portal		Welcome, Robe	ert Drake Logout
Non-Depository						Actions 🗸
Pending Tasks						
Task Name Submit New License Application	License Type Sales Finance	Entity Name ACME Lending	License Number	Location 1 Main St	Assigned On 09/01/2020 03:19 pm	Open



If the task is related to a license application, the original application form submitted will be opened with the Review comments from the Department shown.

Self-Service Program Selection	DoBS Portal Welcome, Robert Drake Logout
Submit Sales Finance	Company Application
	elication Status Web Address Progress -
Home / ACME Lending / Submit Sales Fina	nce Company Application
Application Review Comments     [Aldrich-Benjamin Veluz - 09/01/2020 3:18 PM]     Please provide more information regarding Ro	bert Drake.
General Details	General Details
Contacts	Have any officers, directors, owners, partners or members and any managers identified on this application ever been convicted of, pled guilty to, or pled nolo contendere (no context) or given a diversionary sentence in lieu of conviction to any felony in this Commonwealth or anywhere else?
Affirmation	Section 627(a)(5) of the Consumer Credit Code." O Ves
	The Department of Banking and Securities requires all applicants to provide both National Criminal History Record Information (fingerprint cards) and Pennsylvania Criminal Record Checks for all officers, directors, owners, partners or members and any managers as per Section 627/60(5) of the Consumer Credit Code. Instructions for completing all required criminal history checks (PATCH and IdentoGo) and can be found at the end of the application.
	Within the past ten (I0) years, has the applicant or applicant's affiliate, owner, partner, member, officer, director, employee or agent pleaded guility to, entered a plea of nolo contender (no contest) to or been convicted of a violation under Section 527 (pleating puthout a license) or subsection A of the former act known as the Motor Vehicle Sales Finance Act? Section 527(10)(2) of the Consumer Creatic Code."
	O Ves ● No
	Next >

The user can then make changes to the application and submit it back to the Department similar to how they filled-out the application form initially.

#### **Renewal Application**

After opening the pending renewal task, please review all information related to your company. Make any necessary changes to officers, branch managers or DBAs and submit the changes.

Submit Co	ollector Re	possessor	Renewal Application	
Entity Name	Federal ID Number	Application Status	Web Address	
Test Entity	55-555555	In-Progress	www.thereisntone.com	
Home / Test Entit	y / Submit Collector R	epossessor Renewal Ap	plication	
Step 1 Applicati	ion Sul	o 2 omit & Pay		
Requirements		Require	ements B save	
General Details			w all company information, including fictitious name (DBA), officers, branch managers and contact information prior to submitting this iny information is incorrect, please make the necessary changes and submit the corrections to the Department via the Portal.	
Contracts		Please do no	ot use the 'copy and paste' feature to enter information.	
Affirmation			as been discovered after submission of the renewal application, please do not withdraw the application. Contact the Licensing Office at 717- via email at RA-AskLicensing@pa.gov	
			Next >	



Under the [General Details] tab you will be asked to verify the contact information.

Step 1 Application	ep 2 ubmit & Pay
Requirements	General Details
General Details	Do any license contacts need to be updated? •
Contracts	Have any officers, owner, directors, partners, members or any managers identified on this application during the past licensing year been convicted of, pled
Affirmation	guilty to, or nois contendere (no context) or given a diversionary sentence in lieu of conviction to any felony in this Commonwealth or elsewhere? Section 6217(a)(3) of the Consumer Credit Code? *

If changes are required, click [Yes]. You will be directed to the Contact section to make the changes. Do Not Use Call Center telephone numbers for your Contact Information

#### IT IS IMPORTANT TO UPDATE ANY CONTACTS TO ENSURE THAT YOU RECEIVE CORRESPONDENCE FROM THE DEPARTMENT

Step 1 Application	Step 2 Submit 8	& Pay			
Requirements		General Details			
General Details		Do any license contacts need to be up • Yes O No	bda	tted? •	
Contracts			o e	dit the license contacts before submitting this license renewal applicati	on
Home / Test Entity / License #31 - Coll Apply to Edit Contacts	lector Repossessor / Apply to	Change Contacts			
	Please provide the following in Contact	formation about the required contact types: Licensing Cor	nta	et, Examination Contact, Compliance Contact, Consumer Services Contact, Billing	
	Contact			Copy Remove	
	Contact Type *			Title *	
	Billing Contact	~		President	
	First Name *			Last Name *	
	Wily			Coyote	
	Home Phone Number			Cell Phone Number *	
	555-555-5555			555-555-5555	
	O Phone numbers cannot b	e call center numbers		Phone numbers cannot be call center numbers	



# Prepare Examination Materials and Loan Logs/Provide Exam Verification or Follow-up

The DOBS Portal enables the user to submit documents and information to the Department for their examinations. The Pending Tasks area on the Non-Depository Dashboard will show any task that is assigned for the user to work on.

1. On the Non-Depository dashboard, the user can click on the [Open] button for the task associated with the Exam.

Self-Service Program Selection			DoBS Portal		Welcom	e, Robert Drake Logou
Non-Depository						Actions -
Pending Tasks						
Task Name	License Type	Entity Name	License Number	Location	Assigned On	Open

2. If the task name is Prepare Examination Materials or Prepare Loan Logs, the Prepare Examination Materials / Prepare Loan Logs screen will show for the user to provide documents and information on.

Note that the requested exam information will be different depending on various factors. The screenshot below is meant as an example of how the screen will look like, and it may be different than the one the user will be shown.

Self-Service Program Selection	DoBS Portal	Welcome, Robert Drake Logout
Prepare Examination Materia	ls	
Exam Number         Exam Status         Entity Name         Federal I           20367         In Progress         ACME Lending         45-45747	Number         License Number         License Type           47         1         1	
Home / ACME Lending / Prepare Examination Materials		
Exam Scheduled Date		
Setup Letter Verification	I verify that I have read the set-up letter (sent via email).	
Requested Exam Information	a Questionnaire: Provide the completed questionnaire. Utilize the link above obtain a copy of the questionnaire. Add Attachment	
	Document	
3	No Documents Attached	
	RECORDS INFORMATION REQUEST	
	Examination Period:	
	Add Attachment	
	Document	
	No Documents Attached	
	b. Policies and procedures: Provide a list of specific policies and procedures that govern the operations of the company. Additional policies and procedures may be requested at the discretion of the examiner. Add Attachment	
	Document	
	No Documents Attached	



3. If the task name is Provide Exam Verification or Follow-up, the Provide Exam Verification or Follow-up screen will show for the user to provide additional information that the Department is requesting.

The Examiner Feedback shows the details of what needs to be provided while the Examiner Supporting Documents will have documents available for download.

Self-Se	ervice Program Sel	lection			DoE	3S Po	rtal		Welcome, Robert Drake Logout
Provide	Exam Ver	rification c	or Followu	D					
Exam Number 20368	Exam Status Review & Approval	Entity Name ACME Lending	Federal ID Number 45-4574747	License Number 2	r License Type				
Home / ACM	E Lending / Provide	Exam Verification or Fe	ollowup					_	
		Examiner Feedba		min Veluz - 09/03/. additional inform	2020 1:10 PM] nation regarding the Exam of	n installmen	t Seller		
	Examine	r Supporting Docume	nts Document				Document Type		
							Correspondence		
		Entity Respon	Provide feed	oack here					
		Entity Docume	nts Add Attachn	ient					
			Document			D	ocument Type		
						Entity D	ocuments Added		
			Cancel	ubmit					

4. Once all the requested exam information has been provided and attached, the user will then click on the [Submit] button. The task will then be removed from the Pending Tasks on the Non-Depository dashboard.

### **User Management**

The DOBS Portal enables the user to provide other users access to their entity. On the Entity screen, the User Management tab will show all users that have access to the entity.

The Authorized Users section lists all users that currently have access to the entity and have logged-in to the DOBS Portal. The Invited Users section lists all users that have been invited to have access but have not logged-in to the DOBS Portal.



Self-Service Program Selection		DoBS	Portal		Welcome, Robert Drake Logou
ACME Lending					Entity Actions 🗸
Federal ID Number Web Address 45-4574747					
Home / ACME Lending					
Pending Tasks	User Managemer	nt			
Active Applications	Authorized Users				
Identification	First Name	Last Name	Email	Access Level	
Locations	Robert	Drake	rdrake.cmm@gmail.com	Administrator	
Entity Officers	First Name	Last Name	Email	Access Level	Manage User
Books and Records	Paul	Hepler	dcollier@c20g.com	Administrator	
User Management	Invited Users				Invite User to Join Entity
	No Invited Users				

#### Access Levels

There are 3 Access Levels on the DOBS Portal

- Administrator
  - The Administrator have access to submit any type of application as well as provide access to other users.
- Manager
  - $\circ$   $\;$  The Manager have access to submit any type of application.
- Viewer
  - The Viewer have access to view information but NOT submit any type of application.

#### Invite User to Join Entity

When a user clicks on the [Invite User to Join Entity] they will provide the First Name, Last Name, Email Address and Access Level for the user they are trying to add. A Join Code is then sent to the individual added that will be used to add them to the Entity.

Invite a User to Join ACME Lending						
First Name*	First Name					
Last Name *	Last Name					
Email Address *	Email					
Access Level *						
	Cancel Submit					

#### Manage User

Administrators are allowed to change the access levels of other users as well as revoke access. This can be done by clicking on the [Manage User] button.



Self-Service Program Selection		DoB	5 Portal		Welcome, Robert Drake Logou
ACME Lending					Entity Actions 🗸
Federal ID Number Web Address 45-4574747					
Home / ACME Lending					
Pending Tasks	User Management				
Active Applications	Authorized Users				
Identification	First Name	Last Name	Email	Access Level	
Locations	Robert	Drake	rdrake.cmm@gmail.com	Administrator	
Entity Officers	First Name	Last Name	Email	Access Level	Manage User
Books and Records	Paul	Hepler	dcollier@c20g.com	Administrator	Hundge oser
User Management	Invited Users				Invite User to Join Entity
	No Invited Users				

#### The user record will then be shown where they can change the access level or revoke access.

Self-Service Program Selection		DoBS Portal	Welcome, Robert Drake	Logout
ACME Lending				
Federal ID Number Web Address 45-4574747				
Home / ACME Lending / Manage User				
Manage User - Paul Hepler				
User Details				
First Name	Paul			
Last Name	Hepler			
Email	dcollier@c20g.com			
Entity Privileges		Revoke User Access		
Within the entity ACME Lending, Paul Hepler should have the following access level:		Click the following button to revoke Paul Hepler's access to the entity ACME Lending. The user will lose access to the entity, and will need to be re-invited in order to perform any future excions.		
Access Level	Administrator   Save Cancel	Revoke access for Paul Hepler		