

CHECK CASHING

RELOCATION APPLICATION

Ohio Check-Cashing Act

Ohio Revised Code Chapter 1315.21 to 1315.30, 1315.99 and 1321.21
Ohio Administrative Code Chapter 1301:8-8



Ohio Department Of Commerce

Division Of Financial Institutions

77 South High Street, 21st Floor

Columbus, Ohio, 43215-6120

Telephone: (614) 728-8400

www.com.state.oh.us/dfi

WARNING: It is a crime to provide a false statement to a government official or public agency. R.C. 2921.13.

"An Equal Opportunity Employer and Service Provider"

For DFI Use Only
Issue Date _____
File ID _____

CHECK CASHING RELOCATION APPLICATION

Ohio Revised Code Chapter 1315.21 to 1315.30, 1315.99 and 1321.21
Ohio Administrative Code Chapter 1301:8-8
This application is for a Relocation only

Print Or Type in Blue or Black Ink

ANSWER ALL QUESTIONS. IF NOT APPLICABLE, PLEASE INDICATE.

1. Name of Licensee _____
(Must be same business entity as original license.)

Federal Tax ID Number _____
2. Fictitious name or d/b/a, if applicable _____
3. Present Address of License _____
(As stated on license)
City, Village or Township _____ State _____ County _____ Zip Code _____

(a) Indicate your present License Number: CC- _____
4. Relocation To _____

City, Village or Township _____ State _____ County _____ Zip Code _____
(Physical Location)

(a) Is the address to be licensed zoned for this type of business? Yes No If not, a new license cannot be issued.
5. The date of the proposed relocation _____
(This application must be submitted at least 30 days prior to the effective move date.)
6. How was the new location within the political subdivision (City, Village or Township) verified? (U.S. Post Office, County Engineer, etc.) _____
7. Indicate the proposed business hours and days of this location _____

Telephone Number _____
8. Will all books, records, files, etc. from business conducted under your present license be transferred to the new location?

Yes No If no, attach a separate sheet marked "**Schedule 8**", giving complete details.
9. If a corporation, list any officers or directors that have been added or deleted since the last application was filed on a separate sheet marked "**Schedule 9**". If no changes, so state. _____
10. Upon receipt of your Relocation License you **must** return your present license.

For DFI Use Only		Fee: \$10.00	
Check No. _____	Amount _____	Date _____	Rec. By _____
TC: 100-CC	Pay-In # _____	Deposit Date _____	RS: 2999

CHECK CASHING RELOCATION APPLICATION

Ohio Revised Code Chapter 1315.21 to 1315.30, 1315.99 and 1321.21
Ohio Administrative Code Chapter 1301:8-8
(Continued)

Company Name: _____

ATTESTATION

NOTE: This application must be signed by:

- The owner if applicant is a sole proprietor;
- At least two partners if the applicant is a partnership;
- At least two members if applicant is a limited liability company(if applicable); or
- At least two officers if the applicant is a corporation.

I (We), the undersigned, swear or affirm that this application and any attachments have been prepared or carefully reviewed by me (us) and that these constitute a complete, truthful, and correct statement of all information requested herein. I (We) realize that any false or fraudulent representation or substantial misrepresentation will be grounds for denial of this application or revocation of any license granted hereunder, and is subject to criminal prosecution under Section 2921.13 of the Ohio Revised Code.

Printed Name (Person 1) Title Date

Printed Name (Person 2) Title Date

Signature (Person 1)

Signature (Person 2)

Instructions: Regulation 1301:8-8-02(C) of the Ohio Revised Code states, "Every check-cashing business shall notify the division of Financial Institutions in writing thirty days prior to the effective date of a change in the address shown on its license. If a check-cashing business intends to move its place of business, a new license must be obtained prior to conducting business at the new location. The division of Financial Institutions will issue a new license to a home or branch office which is relocated for a fee of ten dollars."

NOTE: Fee: \$10.00

WARNING: It is a crime to provide a false statement to a government official or public agency. R.C. 2921.13.

For DFI Office Use Only

Date application approved _____ By _____, Superintendent

"An Equal Opportunity Employer and Service Provider"