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## SECTION 6 – LOAN ORIGINATOR INFORMATION

This form is available online at [www.oregonimla.org](http://www.oregonimla.org) and may be used for additions, modifications, and terminations. The online version of this form may be submitted electronically; it does not need to be mailed or faxed. To obtain a PIN for your firm, please contact mortgage lending support staff, (503) 378-4140, to request one.

This section is to be completed for each loan originator. Copy this form as needed. Loan originator's Social Security number is optional if you provide a complete, detailed physical description of the loan originator, including height, weight, eye and hair color, and a description of physical characteristics such as birthmarks and tattoos.

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Employer name: \_\_\_\_\_ License no.: \_\_\_\_\_

Operates out of branch located at: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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### LOAN ORIGINATOR

Name: \_\_\_\_\_

Date began originating Oregon loans for this employer: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Social Security number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of birth: \_\_\_\_\_

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### OWNER/CONTROL PERSON CERTIFICATION

	Yes	No
Does the originator work as a loan originator for any other company?	<input type="checkbox"/>	<input type="checkbox"/>
Has the originator failed to meet any initial or continuing-education and test requirements?	<input type="checkbox"/>	<input type="checkbox"/>
Has the originator engaged in any activity prohibited by Oregon mortgage lender law?	<input type="checkbox"/>	<input type="checkbox"/>
Has a criminal-records check been conducted?	<input type="checkbox"/>	<input type="checkbox"/>

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**Employer's notification requirements (OAR 441-880-0030(2)):** Within 30 days of a person starting to function as a loan originator or ending function as a loan originator, the employer must notify the director by amending its licensee application in a form approved by the director.

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**The following section must be signed by a duly authorized key officer, member, partner, or owner of the mortgage banker or mortgage broker.**

**I certify that the information provided on this page is current, accurate, and complete.**

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

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