

STATE OF WASHINGTON

DEPARTMENT OF FINANCIAL INSTITUTIONS

DIVISION OF CONSUMER SERVICES

P.O. Box 41200 • Olympia, Washington 98504-1200 Telephone (360) 902-8703 • TDD (360) 664-8126 • FAX (360) 664-2258 • <u>http://www.dfi.wa.gov/cs</u>

MORTGAGE BROKER COMPANY 2023 DECLARATION OF ACTIVITY

I,	Print Name					
	Print Name					
1.	I am above the age of eighteen and, based on my personal knowledge, am competent to testify to the facts as stated in this declaration.					
2.	I am the Designated Broker for, whose Print Company Name					
	Mortgage Brol	(NMLS number)				
3.	I certify that since January 1, 2023 the Company noted in paragraph 2					
	has has not (Check One)			uire licensure as a r Broker Practices Ac	nortgage broker under t (the Act).	
4.	I also certify that since January 1, 2023, the Company noted in paragraph 2					
	has has not (Check One)		received any compensation that would require licensure as a mortgage broker Chapter 19.146 RCW, the Mortgage Broker Practices Act (the Act).			
5.	I further certify that the Company noted in paragraph 2 will refrain from conducting any activity that would require licensure as a mortgage broker under Chapter 19.146 RCW, until the Department issues the Company a valid mortgage broker license for 2023.					
l declar correct.		y of perjury under th	e laws of the State	of Washington that t	he foregoing is true and	
DATED this day of, 2023 in,, Day Month City State						
	Day	Month	City	State	9	

Signature

Contact Phone Number