



Mortgage Loan Originator Temporary License Update Form

Please complete this form and return to:

**Division of Real Estate
Attn: Mortgage Loan Originator Licensing
Department
1560 Broadway, Suite 925
Denver, CO. 80202**

Or Fax to:

**Division of Real Estate
Attn: Mortgage Loan Originator Licensing
Department
Fax: 303-894-2683**

Sponsoring Loan Originator Information:

Name of Licensee _____
(Last Name) (First Name) (Middle Name)

License Number: _____

NMLS Registration Number: _____ Date of Birth: _____

Social Security Number: _____ / _____ / _____ Phone Number: _____

Residence Address: _____
(Address) (City) (State) (Zip Code)

P.O. Box if applicable: _____
(Address) (City) (State) (Zip Code)

Business Address: _____
(Address) (City) (State) (Zip Code)

E-Mail Address: _____

Business Name: _____

