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# Credit Access Business Branch Application

**THIS FORM IS TO BE USED IN CONJUNCTION WITH THE "APPLICATION FOR LICENSE (ADM10)"  
and "THIRD-PARTY LENDER ORGANIZATIONS (CAB12)"**

If the applicant indicated on the "Application for License (ADM10)" that business is conducted with consumers through branch offices or other locations, the applicant must complete this form to apply for additional branch licenses.

If the application is a transfer application for a branch location, include the license number being transferred.

Entity Name or Name of Owner/Sole Proprietor					<i>FOR OFFICE USE ONLY</i>	
Operating Name (d/b/a)					Entity License No. _____	
Individual Responsible for Day-to-Day Operations					Transfer License No. _____	
Title of Individual Responsible for Day-to-Day Operations					<input type="checkbox"/> Active License <input type="checkbox"/> Inactive License	
Email Address of Individual Responsible for Day-to-Day Operations					Primary Business Designator <i>(Please select one)</i>	
Location Address					<input type="checkbox"/> Payday Loans	
					<input type="checkbox"/> Auto Title Loans	
					<input type="checkbox"/> Payday & Auto Title Loans	
_____	_____	_____	_____	_____	_____	_____
City	State	Zip Code	County	Location Phone Number	Location Fax Number	

Entity Name or Name of Owner/Sole Proprietor					<i>FOR OFFICE USE ONLY</i>	
Operating Name (d/b/a)					Entity License No. _____	
Individual Responsible for Day-to-Day Operations					Transfer License No. _____	
Title of Individual Responsible for Day-to-Day Operations					<input type="checkbox"/> Active License <input type="checkbox"/> Inactive License	
Email Address of Individual Responsible for Day-to-Day Operations					Primary Business Designator <i>(Please select one)</i>	
Location Address					<input type="checkbox"/> Payday Loans	
					<input type="checkbox"/> Auto Title Loans	
					<input type="checkbox"/> Payday & Auto Title Loans	
_____	_____	_____	_____	_____	_____	_____
City	State	Zip Code	County	Location Phone Number	Location Fax Number	

The Office of Consumer Credit Commissioner obtains information from this form and certain third-party sources. With few exceptions, you may review and correct the information we collect. To find out more about the information we collect or to make an open records request, contact our Public Information Officer at 512-936-7622 or public.information@occc.texas.gov.