OCCC
TEXAS OFFICE OF CONSUMER CREDIT COMMISSIONER

Plain Language Contract Submission Form

(Please fill in the following blanks and submit this form to the OCCC with your plain language contract submission.)

A. Contact Information

1. Contact person:
Address:

Telephone: - -
Fax: - -
Email:

2. Name of Business*:
Address (if different):

Telephone (if different): - -
Fax (if different): - -

3. Name of Business's Registered/Statutory Agent
Address:

Telephone: - -

B. Contract Submission Requirements (A digital version of the submitted contract is required.)

1. I have submitted a scanned version of the actual plain language contract that will be used. (PDF)
2. I have submitted a digital version of the plain language contract in Microsoft Word format (.doc or .docx).

3. This contract is a: New Submission Revision for contract with form #

C. Plain Language Requirements

Contract Type (Chapter 342 Subchapters E, F, G, or Chapter 348):
Font type
Size (8 pt minimum)
Flesch-Kincaid Grade Level (see maximum below)
Form Number (uniquely identifies the contract submitted)

D. Certificate of Readability and Acknowledgment

I certify that the information shown above is correct, and the enclosed contract submission: (1) is drafted in plain language; (2) meets the minimum font type and font size requirements specified by 7 Texas Administrative Code §84.806 or 7 Texas Administrative Code §90.103, as applicable; and (3) has Flesch-Kincaid score that does not exceed the maximum Flesch-Kincaid score for the type of contract shown below.

Maximum Flesch-Kincaid Scores by Contract Type	
Type of Contract	**Maximum Flesch-Kincaid Grade Level Score**
Chapter 342-E – consumer loan	**9**
Chapter 342-F – consumer loan	**8**
Chapter 342-G secondary mortgage loan	**10**
Chapter 348 motor vehicle retail installment contract	**11**

I also certify that the contract is fully compliant with federal and state law. I understand the OCCC will only review the submitted contract for font type, font size, and the Flesch-Kincaid score. I also understand the OCCC will conduct a compliance review of the individual contract provisions during a routine examination.

_____ _____
(Signature of contact person) (Date)

* If the contracts will be used by someone other than business shown above, please identify all such users in a separate attachment by name, address, telephone number and contact person.