



Agency Name		
Address		
City	State	Zip
Phone	Fax	
Owner	Cell	
E-Mail		
Sale Person		

PROCESSING AGENCY CHECKLIST

Sale Person Check	Requirements	Compliance Check
<input type="checkbox"/>	Agent Application. (Filled out clearly, properly and completely and signed)	<input type="checkbox"/>
<input type="checkbox"/>	Agreement. (Signed)	<input type="checkbox"/>
<input type="checkbox"/>	Authorization to release information. (Signed)	<input type="checkbox"/>
<input type="checkbox"/>	Valid two piece ID all principals/business owner/directors.	<input type="checkbox"/>
<input type="checkbox"/>	Copy of the Trade license/Corporate registration	<input type="checkbox"/>
<input type="checkbox"/>	Copy of the Certificate of Incorporation (*)	<input type="checkbox"/>
<input type="checkbox"/>	Copy or proof of business or corporation number	<input type="checkbox"/>
<input type="checkbox"/>	Copy of Business Lease	<input type="checkbox"/>
<input type="checkbox"/>	Proof of principals' home address.(Home Telephone bill, Etc.)	<input type="checkbox"/>
<input type="checkbox"/>	AML training Acknowledgment	<input type="checkbox"/>

Comments:

Sale Person Signature

Approved by