Nebraska Department of Banking and Finance

APPLICATION FOR TEMPORARY OFFICE RELOCATION DUE TO HEALTH QUARANTINE Mortgage Loan Originators and Processors/Underwriters

Name of Mortgage Banker & N	1MLS#:		
Name(non-MLO) or NMLS#(if MLO)	Current Location's NMLS#	Temp. Work Location	Est. Length of Relocation
			-
Attached additional sheets as	necessary.		
Entity Authorization:			
By (Signature):		-	
Printed Name:		NMLS# (if applicable)	
Title:	Date	e:	
Submit this form to the Nebra Put your entity's name, NMLS response will be given from th	#, and the words "Temp	orary Branch Relocatio	
Per Nebraska statutes, all resingles includes MLO, processing, and underwriters who will tempor not accommodate the type of the Department with as much dob.mortgage@nebraska.gov	I underwriting activity. Larily work from a non-lice office relocation taking information as possible	Use this form for all MLC censed main or branch place for an entity (ma	Os, processors, and location. If this form does ss displacement), contact
If your entity has not done so location policies. All supervision temporary work location.			
Date Received:	NDBF Approval:	Date:	