

# State(s) Approval Form

Please list states that you would like to have approved at this time. **Please note:** States not listed in the initial Broker Application may be subject to requests for additional information in order to be added at a later date.

Email the completed form to MB - CMH Broker Approval [brokerapproval@carringtonmh.com](mailto:brokerapproval@carringtonmh.com).

| <b>Request Date:</b>  |                | <b>Submitted by:</b>   |                    | <b>Broker</b>          | <b>CMS-ML</b>  |
|---|----------------|------------------------|--------------------|------------------------|--|
| <b>Company Name:</b>  |                |                        |                    |                        |  |
| <b>Address:</b>   |                |                        |                    |                        |  |
| <b>City:</b>  |                | <b>State:</b>          |                    | <b>Zip Code:</b>       |  |
| <b>Owner:</b>   |                |                        |                    |                        |  |
| <b>Email:</b>   |                |                        |                    |                        |  |
| <b>Phone Number:</b>  |                |                        | <b>Fax Number:</b> |                        |  |
| <b>List of states requesting Approval: (include home state)</b> |                |                        |                    |                        |  |
| <b>State</b>  | <b>NMLS ID</b> | <b>Type of License</b> | <b>Status</b>      | <b>Renewed Through</b> | <b>Approval Date / Declination Reason (Broker Approval Use Only)</b> |
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