

**Full Name of Applicant Firm:** \_\_\_\_\_

1. Is any member of the firm involved in the purchase of debt or factoring?  Yes  No  
If yes, please explain: \_\_\_\_\_

2. Does any member of the firm have any interest in any entity that is involved in the purchase of debt or factoring?  Yes  No  
If yes, please explain: \_\_\_\_\_

3. How much of the firm's practice involves the following:

	Percentage	Average Case Value
Bankruptcy Representation - Consumer:		
Bankruptcy Representation - Commercial:		
Bankruptcy Trustee – Consumer:		
Bankruptcy Trustee – Commercial:		
Collections:		

4. Does any member of the firm have any interest in any entity that is involved in credit counseling?  Yes  No  
If yes, please explain: \_\_\_\_\_

5. Have all form letters and all correspondence been reviewed to be certain they comply with all state and federal laws?  Yes  No  
If no, please explain: \_\_\_\_\_

6. Does the firm use nonlawyer personnel to collect debts via phone?  Yes  No  
If yes, does the firm require use of a script that has been reviewed for compliance with the Fair Debt Collection Practices Act and applicable state laws?  Yes  No

\_\_\_\_\_  
Signature of Officer or Partner of Firm

\_\_\_\_\_  
Print name of Officer or Partner

\_\_\_\_\_  
Date