



CHECK-CASHING BUSINESS – ADDITIONAL LOCATION APPLICATION

This application is to add a new location to an existing Check Cashing License. Do not use this application unless you already have a Check Cashing License in Oregon. The Division charges a \$300 licensing fee per location and a reduced investigation fee of \$75 per application. Please use additional forms if adding more than one location and respond to all questions. Answer N/A if the answer is “none” or “not applicable.” If you are adding new business names for the location, please be aware that all business names used in Oregon must be registered with the Oregon Office of the Secretary of State, Business Registry Section, 503-986-2200, www.filinginoregon.com.

An application will be deemed abandoned if applicant fails to provide requested information within 30 days of a warning that the application is about to be deemed abandoned. Application fees are not refundable. (OAR 441-755-0120) Questions? Call 503-378-4140.

More information: <https://dfr.oregon.gov/business/licensing/financial/Pages/check-cashing-bussiness.aspx>

Licensee name:		License no.:	
New location physical address:			
City:	State:	ZIP:	
New location mailing address, if different:			
City:	State:	ZIP:	
Assumed business names for this location:			
Phone:	Fax:	Email address:	
Branch manager's name:			

Check this box if the fees for cashing payment instruments are different at this location. Then, provide the proposed fee information for that location, along with this completed application and the \$300 license fee per location and \$75 investigation fee. (Only one investigation fee is required per application, regardless of how many locations are being added.)

Secure fax for credit card payments: 503-947-2333

If paying by credit card, applicant must sign credit card information box.

<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover	Phone: _____
Cardholder signature _____	Expiration date _____
Name of cardholder as shown on credit card _____	(1001) License fee(s): \$ _____
Credit card number _____	(1004) Investigation fee: \$ 75
	Total amount: \$ _____

Make check or money order payable to Department of Consumer & Business Services. Do *not* send cash.

Mail application with payment to:

DCBS - Fiscal Services
 P.O. Box 14610
 Salem, OR 97309-0445

PCA code: 12104/0600 93090/1001 93090/1004

Fiscal use only:



Maximum Fees
See ORS 697.520

Type of Payment Instrument	With Valid and Current Government Issued Photo Identification	Without Valid and Current Government Issued Photo Identification
<ul style="list-style-type: none"> • Issued by the federal government or one of its agencies • Issued by the State of Oregon or one of its agencies • Issued by the municipality in which the person is cashing the payment instrument 	<p>2% of the face value of the payment instrument or \$5, whichever is more.</p> <p>Maximum charge: \$100</p>	<p>2.5% of the face value of the payment instrument or \$5, whichever is more.</p> <p>Maximum charge: \$100</p>
<ul style="list-style-type: none"> • Issued by any other state or political subdivision • Payroll check 	<p>3% of the face value of the payment instrument or \$5, whichever is more.</p> <p>Maximum charge: \$100</p>	<p>3.5% of the face value of the payment instrument or \$5, whichever is more.</p> <p>Maximum charge: \$100</p>
<ul style="list-style-type: none"> • Personal checks • Money orders • Any other type of payment instrument 	<p>10% or the face value of the payment instrument or \$5, whichever is more.</p> <p>Maximum charge: \$100</p>	<p>10% or the face value of the payment instrument or \$5, whichever is more.</p> <p>Maximum charge: \$100</p>