

**APPLICATION FOR BROKER LICENSE APPLICATION**  
**FEE \$200.00**

PLEASE SUBMIT THE FOLLOWING:

1. Copy of New Mexico Taxation & Revenue Department Registration and current tax identification no. \_\_\_\_\_
2. Any business applying as a corporation, limited liability company, limited partnership, limited liability partnership or general partnership must submit a certified copy of the articles of incorporation, articles of organization, certificate of registration, or statement of qualification at the time the application is filed with the division. This is obtained from the NM Secretary of State.
3. Certificate of Qualifying Party form, signed and notarized (form attached).
4. Financial statement signed and notarized (sample form may be used as a guide).
5. A properly executed consumer protection bond in the amount of \$50,000.00 underwritten by a corporate surety company authorized to conduct business in New Mexico and otherwise meeting all requirements of Section 60-14-6 N.M.S.A. 1983 Comp. (sample form may be used).
6. Copy of warranty for new units, per Section 14.12.6.10 of the Regulations (the sample form may be used as a guide).

**APPLICATION FOR BROKER LICENSE**

7. Three reference letters (1. from a financial institution; 2. individual or firm for whom the Applicant has worked AND; 3. character reference).
8. If you are an out-of-state corporate Broker, complete the attached affidavit (consent to Service of Process).
9. Statement of Authorization and Release Information Form (attached).
10. Copy of exam scores from PSI.
11. If you are negotiating sales on used or pre-owned units as described for a Broker, in the New Mexico Manufactured Housing Division Rules and Regulations, please enclose a copy of an Approved Trust Account.
12. Name and account number of financial institution where business accounts are held:
  - a. Business Account #: \_\_\_\_\_
  - b. Trust Account #: \_\_\_\_\_

**NOTE: ANY CHANGES SHALL BE REPORTED IMMEDIATELY TO THE DIVISION.**

I HEREBY CERTIFY that this application contains no willful misrepresentation and the information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification, that my application will be rejected. If already licensed at time of such investigation and disclosure, my license is subject to suspension or revocation for such misrepresentation of falsification.

SIGNED TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

Note: If selling pre-owned or used manufactured homes, please enclose the trust account number with a copy of the original trust account certificate



CAUTION: You may not engage, or perform, as a Manufactured Housing Broker until your license has been issued.

**APPLICATION FOR BROKER LICENSE APPLICATION**  
**FEE \$200.00**

**DATE:** \_\_\_\_\_

**APPLICANT DOING BUSINESS AS A:**

SOLE OWNER \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORPORATION \_\_\_\_\_ SUBSIDIARY \_\_\_\_\_

Is this retail sales location on Indian or federal land? \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email Address: \_\_\_\_\_

Location of Business: \_\_\_\_\_  
Street Number & Name      City & State      Zip Code

Mailing Address: \_\_\_\_\_  
Street Number & Name      City & State      Zip Code

**If partnership, the members of the partnership are:** \_\_\_\_\_  
\_\_\_\_\_

**If you are a Corporation or Subsidiary, please provide the parent company information below:**

Parent Company Name: \_\_\_\_\_

Parent Company Contact Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent company principal address: \_\_\_\_\_  
Street Number & Name      City & State      Zip Code

Parent Company Location of Business: \_\_\_\_\_  
Street Number & Name      City & State      Zip Code

Parent Company Mailing Address: \_\_\_\_\_  
Street Number & Name      City & State      Zip Code

**Please provide a copy of the Articles of Incorporation with the application**

**Note: Incomplete Application will be returned**



**Please answer the following questions:**

1. Are you familiar with the Manufactured Housing Act and the Regulations?  
YES \_\_\_\_\_ NO \_\_\_\_\_
  
2. Have you previously been licensed in the State of New Mexico or in any other state?  
YES \_\_\_\_\_ NO \_\_\_\_\_  
If yes, give name: \_\_\_\_\_  
License No.: \_\_\_\_\_ Date of Licensing: \_\_\_\_\_  
Date License surrendered: \_\_\_\_\_  
Reason: \_\_\_\_\_
  
3. How long have you maintained an office or residence in the State of New Mexico? \_\_\_\_\_  
Address: \_\_\_\_\_
  
4. Are there any judgments, liens, or suits pending or recorded against applicant?  
YES \_\_\_\_\_ NO \_\_\_\_\_  
❖ If yes, attach details: including date of suit or lien filed, date of judgment or recording of lien; amount of liability, if any.
  
5. Name and title of person with authority to resolve consumer complaints: \_\_\_\_\_  
\_\_\_\_\_
  
6. Do you have any unresolved complaints pending with MHD and/or CID? NO \_\_\_\_\_ YES \_\_\_\_\_
  
7. Have you bid or performed any unlicensed work in the last 12 months? NO \_\_\_\_\_ YES \_\_\_\_\_
  
8. Has applicant ever been convicted of any offenses in this State, or any other State, other than traffic violations? YES \_\_\_\_\_ NO \_\_\_\_\_  
If yes, state offense and date of conviction: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
9. If applicable, is the applicant current with child support payments in New Mexico or any other State? YES \_\_\_\_\_ NO \_\_\_\_\_  
If no, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**CERTIFICATE OF QUALIFYING PARTY**

NAME OF PERSON TO QUALIFY: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_

NAME OF FIRM QUALIFYING FOR: \_\_\_\_\_

I am also a Qualifying Party for the following Broker Lot locations:

\_\_\_\_\_  
Business Name and Address 1.

\_\_\_\_\_  
Business Name and Address 2.

\_\_\_\_\_  
Business Name and Address 3.

I do hereby certify that I am the Qualifying Party of the above named applicant for a New Mexico Manufactured Housing Division license. That as such Qualifying Party, I will be a regular and bona fide (employee/proprietor/corporate officer/partner) for the above named applicant and that I will have active and direct supervision and control of all operations necessary to secure full compliance with all provisions of the Act, being Sections 60-14-1 et. Seq., NMSA, 1983 Comp., and the Regulations adopted pursuant thereto by the Manufactured Housing Division.

I further certify that by signing below, I assume full responsibility for the compliance with provisions of Section 60-14-1, et seq., NMSA, 1983 Comp., and the Regulations adopted pursuant thereto by the Manufactured Housing Division, and that if for any reason I become disassociated, or for any reason cease to be the Qualifying Party of the above applicant, I will within thirty (30) days the office of the Manufactured Housing Division in writing.

I hereby certify under the penalty of perjury that the foregoing is true and correct and certify to the truth and accuracy of all supplementary statements, answers and representations attached hereto and made a part of this application.

NOTE: This certificate of qualification is not transferable to another person. A separate form must be used for each Qualifying Party.

APPLICANTS SIGNATURE: \_\_\_\_\_

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

\_\_\_\_\_ first being duly sworn upon oath and deposes and says that he has/they have read and signed the foregoing Certificate and that the matters and things stated in said Certificate are true and correct.

Sworn to and subscribed before me, the undersigned authority, on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

Signature of Notary: \_\_\_\_\_



**CHIEF EXECUTIVE OF OFFICE AFFIDAVIT**

STATE OF \_\_\_\_\_ x

COUNTY OF \_\_\_\_\_ x

**CONSENT TO SERVICE OF PROCESS**

Pursuant to the licensing provisions of the Manufactured Housing Act of New Mexico and the regulations of the Manufactured Housing Division, the undersigned licensee does hereby waive the usual service of process in connection with all claims, matters or causes of action which may be filed or brought against it in the State of New Mexico for alleged violations of the Manufactured Housing Act or consumer complaints in connection therewith and does hereby agree to accept service of any such complaint or cause of action by registered or certified mail to be addressed and delivered to the herein below named **chief executive office of the corporation**. Said licensed does hereby further agree to appear and answer any such complaint or cause of action within twenty (20) days from and after the date of actual receipt of service by certified or registered mail; if licensee fails to appear and answer within such time, the licensee shall be in default and the licensee may not thereafter object to any order or judgment which may be entered against it. Said consent shall continue in full force and effect until all claims, matters or causes of action filed are resolved or until two (2) years after the licensee has terminated or whichever period is later.

The foregoing statement and agreements are made under oath and I certify and swear that such are true and correct.

**OFFICER TO BE SERVED**

\_\_\_\_\_  
 (Name) (Title)

\_\_\_\_\_  
 (Name of Mfg. Licensee)

\_\_\_\_\_  
 (Business Address) (City, State) (Zip)

Sworn to and subscribed before me, the undersigned authority, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

My Commission Expires: \_\_\_\_\_



**APPLICATION FOR BROKER LICENSE**  
**LIMITED POWER OF ATTORNEY**

STATE OF \_\_\_\_\_ x

COUNTY OF \_\_\_\_\_ x

Know all men by these presents that I, the undersigned, of \_\_\_\_\_,  
 City of \_\_\_\_\_ do hereby make, constitute, and appoint the New Mexico  
 Manufactured Housing Division as my true and lawful attorney in fact for me and in my name for  
 the limited and sole purpose hereinafter stated.

That upon certification by a regularly constituted quorum of the Manufactured Housing Division  
 that the undersigned has been found to be in violation of the Manufactured Housing Act (Sections  
 60-14-6, et. seq., NMSA, 1983 Comp., as amended), or the Regulations adopted there under, that  
 damages have been ascertained as a direct result of such violation(s), and that the determination  
 of liability by the Manufactured Housing Division has become final, to draw upon monies  
 deposited with an F.D.I.C Financial Institution

\_\_\_\_\_  
 (Bank Name & Address)

Designated as (savings accounts/certificate of deposit number) \_\_\_\_\_  
 to a maximum amount of \_\_\_\_\_ as recompense for such damages.

BY:

\_\_\_\_\_  
 (Title)

State of \_\_\_\_\_ x

County of \_\_\_\_\_ x



**APPLICATION FOR BROKER LICENSE**  
***(Model letter to completed by the Bonding agency typed on their Letterhead)***  
**CONSUMER PROTECTION BOND OF**

**BROKER**  **MANUFACTURER**  
 **INSTALLER OR REPAIRMAN**  **BROKER**  
 **CID CROSSOVER CONTRACTOR**

**BOND NO.:** \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS, that we, \_\_\_\_\_  
as Principal and the \_\_\_\_\_ a corporation organized under  
the laws of \_\_\_\_\_, and authorized to transact the business of  
surety ship in the STATE OF NEW MEXICO, as Surety, are held and firmly bound unto the State  
of New Mexico Manufactured Housing Division, as Oblige, in the just and full sum of  
\_\_\_\_\_ DOLLARS (\$\_\_\_\_\_), for which sum, well and truly  
to be made, we bind ourselves, our heirs, executors, administrators, successors and assignees, jointly  
and severally, firmly by these present.

THE CONDITION OF THIS OBLIGATION is that, if it is determined in a proceeding before the  
Manufactured Housing Division that Principal has violated a provision or provisions of the Manufactured  
Housing Act or Regulations there under pertaining to \_\_\_\_\_ of manufactured homes, and that  
such violation has resulted in monetary loss to a consumer of a manufactured home, then Principal shall  
indemnify said consumer against this loss within thirty (30) days of said determination becoming final.

Surety may at any time cancel this bond by giving sixty (60) days written notice to the New Mexico  
Manufactured Housing Division. Surety remains liable, however, for any defaults under this bond  
committed prior to the expiration of the sixty-day period, for a period of two (2) years after said expiration  
period.

SIGNED, SEALED AND DATED, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Surety



**MODEL LETTER TO BE COMPLETED BY FINANCIAL INSTITUTION  
(TYPED ON THEIR LETTERHEAD)**

Date: \_\_\_\_\_

State of New Mexico  
Regulation & Licensing Department  
Manufactured Housing Division  
550 San Antonio Drive  
Albuquerque, NM 87109 (505) 222-9870

This is to certify that \_\_\_\_\_  
(Company Name & Address)

has deposit with this institution \_\_\_\_\_

(in savings account number/certificate of deposit number) \_\_\_\_\_

in the amount of \_\_\_\_\_.

This is being held to meet the bonding requirements of the New Mexico Manufactured Housing Division pursuant to Section 60-14-6, et. seq., NMSA, 1983 Comp., as amended, and the Regulations adopted pursuant thereto by the Manufactured Housing Division.

It is hereby agreed:

- (1) that their deposit is neither assignable or transferable;
- (2) that the principle may not be withdrawn without the express written authorization of the Manufactured Housing Division;
- (3) that the interest accruing on said principle may be withdrawn upon the request and at the direction of the certificate of deposit owner; and
- (4) that the form of the deposit may be changed provided that the Manufactured Housing division is notified in writing, thirty (30) days prior to the proposed change.

Very truly yours,

Bank Office Title \_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_

Sworn to and subscribed before me, the undersigned authority, on this \_\_\_\_\_ day of \_\_\_\_\_,  
20 \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_





**APPLICATION FOR BROKER LICENSE**  
**STATEMENT OF AUTHORIZATION AND RELEASE OF INFORMATION**

I, \_\_\_\_\_ was born on \_\_\_\_\_,  
(Full legal name) (mm/dd/yyyy)

whose home address \_\_\_\_\_ and telephone no. is \_\_\_\_\_,  
(Street, City, State & Zip)

and whose business address is \_\_\_\_\_ with the  
(Street, City, State & Zip)

telephone no. of \_\_\_\_\_, shown as the \_\_\_\_\_  
Title of Position (i.e. Owner, President, etc.)

on an "Application for license" as \_\_\_\_\_  
(Type of License Applying for)

in the name of \_\_\_\_\_  
(Complete name of license as shown on "Application for License")

with the State of New Mexico Office of Manufactured Housing Division, do hereby consent to having an inquiry made as to my moral character, professional reputation and fitness for said license.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association or institution having control of any documents, records, and other information pertaining to me, to furnish to the State of New Mexico office of Manufactured Housing any such information, including documents, records, or information regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, and to permit the Office of the Manufactured Housing or any of their agents or representatives to inspect and make copies of such documents, records and other information.

I hereby release, discharge and exonerate the State of New Mexico Office of Manufactured Housing, their agents and representatives, and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records and other information of the inquiry made by the State of New Mexico Office of Manufactured Housing.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

Sworn and subscribed before me, the undersigned authority, on this \_\_\_\_\_ day of \_\_\_\_\_,  
2020\_\_\_\_\_.

My Commission expires: \_\_\_\_\_



Signature of Notary \_\_\_\_\_

**THIS SAMPLE CONTAINS THE MINIMUM REQUIREMENTS FOR A BROKER NEW HOME WARRANTY AND IS TO BE USED AS A GUIDE ONLY (SEE 14.12.6.10 (A) (B) of the regulations)**

**BROKER'S 12-MONTH (1-YEAR) WARRANTY ON "NEW MOBILE HOMES"**

\_\_\_\_\_  
 Broker's Name License No.

\_\_\_\_\_  
 Street Address City, State, & Zip

IN CONSIDERATION OF THE PURCHASE OF UNIT \_\_\_\_\_  
Manufacturer's Serial No.

Manufactured by \_\_\_\_\_  
Manufacturer's Name

During the \_\_\_\_\_ model year, H.U.D. Label No. \_\_\_\_\_,  
 we make the following warranties:

- (1) That all changes, additions or alterations made to the unit by us are free from defects in materials and workmanship.
- (2) Any appliance or equipment installed by us for which you have now received a manufacturer's warranty, we warranty against any defects in installation. We have installed the following appliances and equipment, and furnish you herewith manufacturer's warranties, as follows:

Oven _____	Range _____	Refrigerator _____	Furnace _____	Water heater _____	Dishwasher _____
Make _____	Make _____	Make _____	Make _____	Make _____	Make _____
SN _____	SN _____	SN _____	SN _____	SN _____	SN _____

- (3) That all new home warranties shall be in effect for a period of at least one (1) year from the date of delivery which is \_\_\_\_\_.
- (4) If we do the original set-up and tie-down operation, you will receive a separate installation warranty from us. However, if another licensed installer does the installation, you should receive an installation warranty from the installer.
- (5) Upon notice of defects within one year after delivery of the above unit, we will take appropriate corrective action within a reasonable period of time. If you have any warranty complaints, please notify us at:

\_\_\_\_\_  
 Street Address, City, State & Zip Telephone No.

Signature of Purchaser \_\_\_\_\_  
 Acknowledging Receipt of Above Listed Warranties

Date: \_\_\_\_\_ Address: \_\_\_\_\_



**ASSETS**

CURRENT ASSETS (receivable in one year or less)

Cash in bank and/or on hand..... \$ \_\_\_\_\_

Amount due on completed portion of contracts..... \$ \_\_\_\_\_

Materials (cost)..... \$ \_\_\_\_\_

Receivables due (short term)..... \$ \_\_\_\_\_

Notes receivable

Itemize \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Other Current Assets

Itemize \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**Total Current Assets** \$ \_\_\_\_\_

**FIXED ASSETS**

Equipment & Tools (depreciated value)..... \$ \_\_\_\_\_

Notes Receivable (long term)

Itemize \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Real Estate & Building (depreciated value)..... \$ \_\_\_\_\_

Description \_\_\_\_\_

\_\_\_\_\_

Other Assets

Itemize \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL FIXED ASSETS** \$ \_\_\_\_\_

**TOTAL CURRENT ASSETS** \$ \_\_\_\_\_

**TOTAL FIXED ASSETS** \$ \_\_\_\_\_

**TOTAL ASSETS** \$ \_\_\_\_\_

**LIABILITIES**

CURRENT LIABILITIES (Payable within one year or less)

Accounts Payable

For Materials..... \$ \_\_\_\_\_

To Others..... \$ \_\_\_\_\_

Notes payable (short term)

To Banks..... \$ \_\_\_\_\_

For Equipment..... \$ \_\_\_\_\_

Unpaid Taxes & Interest..... \$ \_\_\_\_\_

Other Current Liabilities

Itemize \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**Total Current Liabilities** \$ \_\_\_\_\_

**FIXED LIABILITIES**

Mortgages on Real Estate..... \$ \_\_\_\_\_

Long Term notes Payable

Itemize \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL FIXED LIABILITIES** \$ \_\_\_\_\_

**TOTAL CURRENT LIABILITIES** \$ \_\_\_\_\_

**TOTAL FIXED LIABILITIES** \$ \_\_\_\_\_

**TOTAL LIABILITIES** \$ \_\_\_\_\_

**NET WORKING CAPITAL** (Difference between Current assets and current liabilities) \$ \_\_\_\_\_

**NET WORTH** (Difference between total (assets and total liabilities) \$ \_\_\_\_\_

Dollar amount of anticipated gross Balance for this year \$ \_\_\_\_\_

I, \_\_\_\_\_ do solemnly swear that all the statements on the application are true and correct.

Subscribed and sworn before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_. Company Official Signature: \_\_\_\_\_

Notary Public: \_\_\_\_\_ My commission expires: \_\_\_\_\_ Title: \_\_\_\_\_

Company Name: \_\_\_\_\_