



RECEIVABLES MANAGEMENT CERTIFICATION PROGRAM

CERTIFIED RECEIVABLES BUSINESS (CRB) APPLICATION FOR ADDING A FAMILY OF COMPANIES

Instructions for CRBs: Please take your time in filling out this application for adding a Family of Companies to your existing RMAI CRB designation. Type in the fillable PDF or print legibly. RMAI recommends your chief compliance officer complete this application. RMAI further recommends that your chief compliance officer confirm all acknowledgments by visual confirmation or appropriate sampling of accounts, where appropriate, to ensure all responses are complete and accurate.

Date: _____

*Law firms should consult the rules in their states of practice to determine if there are any limitations on holding the firm out to the public as a Certified Business.

CRB Information

1. CRB's Certification Number: _____

2. Legal Name of CRB: _____

3. Physical Address of Headquarters: _____

4. Mailing Address (if different from physical address): _____

5. Main Business Telephone Number: _____

6. Web Site Address: _____

7. Is CRB or one of the family of companies a member of RMAI? Yes No

Family of Companies Information

List the businesses added to the CRB's certified status as a Family of Companies, as that term is defined in section 7.4 of the Certification Program:

(1) Name: _____ EIN: _____

Type of Business: Debt Buying Debt Buying & Third-Party Collection Agency Law Firm*
 Third-Party Collection Agency Creditor

Physical Address (if different from CRB): _____

Web Site Address (only required if business name is used in consumer communications): _____

(2) Name: _____ EIN: _____

Type of Business: Debt Buying Debt Buying & Third-Party Collection Agency Law Firm*
 Third-Party Collection Agency Creditor

Physical Address (if different from CRB): _____

Web Site Address (only required if business name is used in consumer communications): _____

(3) Name: _____ EIN: _____

Type of Business: Debt Buying Debt Buying & Third-Party Collection Agency Law Firm*
 Third-Party Collection Agency Creditor

Physical Address (if different from CRB): _____

Web Site Address (only required if business name is used in consumer communications): _____

(4) Name: _____ EIN: _____

Type of Business: Debt Buying Debt Buying & Third-Party Collection Agency Law Firm*
 Third-Party Collection Agency Creditor

Physical Address (if different from CRB): _____

Web Site Address (only required if business name is used in consumer communications): _____

Please attach any additional businesses after the last page of the application.

Chief Compliance Officer Information

8. Name of Chief Compliance Officer (CCO): _____

9. If CCO goes by different title, please provide: _____

10. Is your CCO certified by RMAI as a "Certified Receivables Compliance Professional"?
 Yes No

10a. If "yes" to question 10, please provide the CCO's certification number: _____

11. Please indicate the date the CCO started serving in this capacity: _____

12. CCO's Business Telephone Number: _____

13. CCO's Business Email Address: _____

Acknowledgments

As the authorized representative of the Applicant, and signatory of this application, I hereby certify and agree to each of the following statements by checking the box next to said statements:

14. _____ CRB has completed the Certification Standards Self-Audit Checklist (see below) and has determined that it is in conformity with the Certification Standards and agrees to maintain conformity with the Certification Standards, as may be amended from time-to-time. CRB further understands that a future independent third-party audit will confirm the veracity of this acknowledgment.

15. _____ CRB understands that all prior attestations it agreed to in its original application for the CRB designation remain in effect and apply to its Family of Companies.

Certification Standards Self-Compliance Checklist

When completing the Certification Standards Self-Compliance Checklist, please review the [Certification Standards](#) in Appendix A. CRB should not submit an application unless it has determined through an internal assessment that it is in conformity with each Certification Standard.

As the authorized representative of the Applicant, and signatory of this application, I hereby certify the Applicant has confirmed that the Family of Companies conforms to each of the following standards by checking the box next to the standard:

Series A (acknowledged on original application)

_____ Insurance Coverage (Standard A2)

Note: Please include proof of insurance with your application.

_____ CFPB Consumer Complaint System (Standard A8)

_____ Website & Publication (Standard A14)

Note: Applicant must have the following completed prior to the submittal of this application: (1) a publicly accessible website that can be found by a simple web search using their corporate name, (2) contact information must be displayed on the website, and (3) the link to the RMAI "consumer resources" page must be added to the website.

Series B (debt buying company & creditor Family of Companies only)

_____ Purchase & Sale Documentation Requirements (Standard B1)

_____ Representations & Warranties (Standard B2)

_____ Due Diligence (Standard B3)

_____ Purchase & Sale Restrictions (Standard B4)

_____ Per Diem Counsel (Standard B5)

_____ Interest (Standard B6)

Series C (collection law firm Family of Companies only)

_____ Bar Admission (Standard C1)

_____ Legal Education (Standard C2)

_____ Legal Malpractice Insurance (Standard C3)

_____ Trust Accounts (Standard C4)

_____ Meaningful Attorney Involvement (Standard C5)

_____ Judgment Retention (Standard C6)

_____ Consumer & Regulatory Complaints (Standard C7)

_____ Court Proceedings (Standard C8)

_____ Capias (Standard C9)

Series D (third party collection agency Family of Companies only)

- _____ Bonding (Standard D1)
- _____ Trust Accounts (Standard D2)
- _____ Client Inquiries (Standard D3)
- _____ Consumer & Regulatory Complaints (Standard D4)
- _____ Cessation of Collections (Standard D5)
- _____ Account Recalls (Standard D6)

Authorized Signature

As the authorized representative of the CRB, I hereby certify that all of the information provided herein is true and complete to the best of my knowledge. I understand that any misrepresentation of information included on this form or in this process is grounds for revocation of our certification. I authorize verification of this information and release all concerned from any liability in connection therewith. CRB hereby applies to RMAI to add a Family of Companies to its CRB certified status and agrees to abide by the rules and procedures established by RMAI in the administration of the Certification Program.

Full Name of CRB: _____

Full Name of Authorized Representative: _____

Signature of Authorized Representative: _____

Date of Signature: _____

Application Fees

FEE	AMOUNT	INSERT AMOUNT
Family of Companies Fee	\$250 for each additional business listed that will share certification with the CRB	

Mail or email the completed application with any required attachments to:

Receivables Management Association International
Receivables Management Certification Program
1050 Fulton Avenue, Suite 120
Sacramento, CA 95825
cert@rmaintl.org

Payment by Automated Clearing House (ACH): Please make payment immediately after submitting your application by using the information below. Your application will not be reviewed until payment is made. In the event your application is not approved, your payment will be refunded in full.

Bank Name	Umpqua Bank
Bank Routing Number	123205054
Bank Account Number	0002148897
SWIFT Code (for international)	UMPQUS6P

Payment by Credit Card: Please make payment immediately after submitting your application by using the [RMAI Payment Portal](#). Your application will not be reviewed until payment is made. In the event your application is not approved, your payment will be refunded in full.

Payment by Check: Please make check payable to “Receivables Management Association International” and include with your application.

If you have any questions concerning the application, please contact the RMAI office by phone at 916-482-2462 or email cert@rmaintl.org.

<p>Confidentiality of Information. Information submitted as part of the Certification Program shall be kept confidential and used for the limited purpose of determining eligibility for certification, compliance with certification, or as provided in section 11.6 of the Certification Program.</p>
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