

**Office of Financial Regulation**  
**Active Military Member/Veteran/Spouse Fee Waiver and Military Service Verification**  
**Form OFR-MIL-001**

**Active Military Member/Veteran/Spouse Application and Renewal Fee Waiver Request**

This form may be used by any individual that is currently serving, or has formerly served, as an active duty member of the United States Armed Forces, including National Guard and Coast Guard units, or a spouse of such member who was married to the member during a period of active duty, or surviving spouse of such member who was serving on active duty at the time of death to request a waiver of the initial application and renewal fee. **Please note all fees must be paid during the application and renewal process; waiver requests are subject to approval by the Office of Financial Regulation.**

Waiver requests shall be submitted as follows:

- For loan originators, upload scanned images of the complete and signed request form and all supporting documentation to the Verification of Experience section via Document Uploads section of the Individual Form MU4 filed via the Nationwide Multistate Licensing System (NMLS).
- For associated persons of an issuer/dealer and associated persons of dealers not registered with the Financial Industry Regulatory Authority (Non-FINRA), upload scanned images of the completed and signed request form, and all supporting documentation to your Office of Financial Regulation Regulatory Enforcement and Licensing (REAL) System account.
- For associated persons of dealers registered with the Financial Industry Regulatory Authority (FINRA) and associated persons of an investment adviser or federal covered adviser, send the completed, originally signed request form and copies of supporting documentation to:

Office of Financial Regulation  
Division of Securities  
200 East Gaines Street  
Tallahassee, FL 32399-0375

**Instructions**

*If you have any questions or need assistance in completing this waiver request, please contact the Office of Financial Regulation at (850) 487-9687.*

Complete each section of the form in its entirety.

**Type of Fee Waiver Requested** - Indicate if you are requesting a waiver for an application or renewal fee.

**Section I – Requestor Information**

- Identify the type of license for which you are requesting a waiver (i.e. Broker Dealer Agents, Loan Originator, etc.).
- System registration number (i.e. FINRA, NMLS, etc.). Leave blank if this is for a new issuer/dealer agent application.
- Under Personal Information, requestors must use the name as it appears on the requestor's Social Security card. Do not use nicknames or initials.
- Under Mailing Address, provide your mailing address and e-mail. This information will be used for sending correspondence regarding your waiver request.
- Contact information is often used to quickly resolve questions by telephone call or e-mail. If telephone and e-mail information is not provided, questions regarding waiver requests will be mailed to the requestor's mailing address and may take longer to resolve.

## Section II – Fee Waiver Requirements

- Select one option that correctly indicates your eligibility for the fee waiver. Submit the supporting documentation requested in the option selected.
- **NOTE:** If both the military member/veteran and spouse are applying for a waiver, each must submit a separate fee waiver request form.

## Section III – Affirmation by Written Declaration

- The Affirmation by Written Declaration must be signed using the name that appears on the requestor's Social Security card. Do not use nicknames or initials.
- If the person requesting the waiver fails to sign the affirmation statement, the Office of Financial Regulation will not process the request.

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Type of Fee Waiver Requested:  Application Fee     Renewal Fee

**Note: All fees must be paid during the application and renewal process; fees will be refunded if approved by the Office of Financial Regulation.**

**Section I – Requestor Information**

PERSONAL INFORMATION			
License Type	System Registration Number		
Last/Surname	First	Middle	Suffix
Birth Date (MM/DD/YYYY)			
E-mail Address		Phone Number	
MAILING ADDRESS			
Street Address or P.O. Box			
City	State	Zip Code	
Country			

**Section II – Fee Waiver Requirements**

FEE WAIVER REQUIREMENTS FOR INITIAL APPLICANTS (Select one option below.)
<input type="checkbox"/> I am currently serving on active duty in a branch of the United States Armed Forces, including National Guard and Coast Guard units. <i>Submit a copy of your military orders.</i>
<input type="checkbox"/> I have served on active duty in a branch of the United States Armed Forces, including National Guard and Coast Guard units, and have been honorably discharged prior to the date of application. <i>Submit a copy of your DD-214, NGB-22, or USCG DD-214.</i>
<input type="checkbox"/> I am the spouse of a member of the United States Armed Forces, including National Guard and Coast Guard units, who is currently serving on active duty. <i>Submit a copy of your marriage certificate to the military service member and a copy of your spouse's military orders.</i>
<input type="checkbox"/> I am the spouse of a former member of the United States Armed Forces who was married to the member during a period of active duty. <i>Submit a copy of your marriage certificate to the military service member and a copy of your spouse's DD-214, NGB-22, or USCG DD-214.</i>
<input type="checkbox"/> I am the surviving spouse of a member of the United States Armed Forces, including National Guard and Coast Guard units, who was serving on active duty at the time of death. <i>Submit a copy of your marriage certificate to the military service member, a copy of your spouse's military orders, and a copy of your spouse's DD-1300.</i>

**FEE WAIVER REQUIREMENTS FOR RENEWALS (Select one option below.)**

- I am currently serving on active duty in a branch of the United States Armed Forces, including National Guard and Coast Guard units. *Submit a copy of your military orders.*
- I am a current member of the United States Armed Forces, including National Guard and Coast Guard units, and served on active duty within the 2 years preceding my license or registration expiration date. *Submit a copy of your DD-214, NGB-22, or USCG DD-214.*
- I am a former member of the United States Armed Forces, including National Guard and Coast Guard units, who served on active duty within the 2 years preceding my license or registration expiration date, and I received an honorable discharge upon separation or discharge. *Submit a copy of your DD-214, NGB-22, or USCG DD-214.*
- I am the spouse of a member of the United States Armed Forces, including National Guard and Coast Guard units, who is currently serving on active duty. *Submit a copy of your marriage certificate to the military service member and a copy of your spouse's military orders.*
- I am the surviving spouse of a member of the United States Armed Forces, including National Guard and Coast Guard units, who was serving on active duty at the time of death and died within the 2 years preceding the surviving spouse's license or registration expiration date. *Submit a copy of your marriage certificate to the military service member, a copy of your spouse's military orders, and a copy of your spouse's DD-1300.*

**Section III – Affirmation by Written Declaration**

**AFFIRMATION BY WRITTEN DECLARATION**

I represent that all information submitted in connection herewith, is complete and accurate and contains no misstatements, misrepresentations, or omissions of material facts. I further acknowledge that any misstatement, misrepresentation, or omission of material facts may cause the Office to reject the waiver request.

Signature:

Date:

Print Name: