

Arkansas State Board of Collection Agencies
523 South Louisiana Street, Suite 460
Little Rock, Arkansas 72201
501-371-1434 Phone Number
501-372-5383 Fax Number
rhetland@asbca.com

AGENCY NAME CHANGE REQUEST FORM

SECTION 1: COLLECTION AGENCY INFORMATION – PHYSICAL ADDRESS ONLY:

License Number: _____

Former Agency Name: _____

Former DBA Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Phone #: _____ Fax #: _____

Contact Person: _____ Phone #: _____

Email Address: _____ Fax #: _____

SECTION 2: NEW COLLECTION AGENCY NAMES:

A new bond rider that reflects the new agency names will be required for Sections 2A and 2B ONLY.

(A) Agency Name: _____

(B) Doing Business as Name: _____

(C) Parent Company Name: _____

(D) Name to Appear on License: _____

Once our office has processed the name change, a new license will be mailed to your agency.