REGISTRATION AS UNLAWFUL DETAINER ASSISTANT
CORPORATION or PARTNERSHIP
COUNTY OF SHASTA

Filing Fees

Filing registration:	$175.00
Filing bond:	$ 8.00
Recording bond: (1st page)	$ 14.00
Total fee payable to Shasta County Clerk	**$197.00**
Each additional ID card Payable to Shasta County Clerk	$ 10.00
Each additional page of bond Additional Fee payable by separate check to Shasta County Recorder	$ 3.00

This space reserved for County Clerk File Stamp use only

☐ **Primary Registration**

☐ **Secondary Registration -** List County of Primary Registration: _____

Bond: The number of UNLAWFUL DETAINER ASSISTANTS employed by the corporation or partnership will determine the required bond amount. Mark the appropriate box.

☐ **1-4 employees** ($25,000) ☐ **5-9 employees** ($50,000) ☐ **10 or more employees** ($100,000)

Business Information: Completely fill in all information requested.

Name of Corporation or Partnership:

Business Name:_____

Business Address:_____

Phone Number:_____

Corporate Officers or General Partners: Provide the name and age of each Corporate Officer or General Partner.

1) Name:_____ Age:_____

2) Name:_____ Age:_____

3) Name:_____ Age:_____

Official Use Only

Registration #: _____
(For Renewals - A new # must be assigned if there has been a lapse in registration over 3 years.)

Start Date: _____

Expiration Date: _____
(2 yrs from date of filing/renewal of registration or expiration of the bond.)

Approved/Denied (Circle one)	Clerk's Initials: _____	Date: _____
Enter in Excel Log	Clerk's Initials: _____	Date: _____
Create Card/Copy Card & Bond	Clerk's Initials: _____	Date: _____
Enter in Riims	Clerk's Initials: _____	Date: _____
Create Label for File Folder	Clerk's Initials: _____	Date: _____
Picked Up/Mailed (circle one)	Clerk's Initials: _____	Date: _____

Education and Experience

This information must be provided for at least one corporate officer or general partner. **Provide the name of the corporate officer or general partner for whom education and experience information is provided.**

NAME: _____

The person listed above must meet the qualifications in ONE of the following 4 options.

- Mark the option that best meets your qualifications.
- Attach legible copies of all documents requested for each box checked within your chosen option. (Attach certified copies and originals as specified).

☐ **OPTION 1 - Paralegal Program/ABA School**

The above-named officer or partner has earned a certificate of completion from a paralegal program that is approved by the American Bar Association *(attach copy of certificate of completion).*

☐ **OPTION 2 - Paralegal Program/NON-ABA School**

The above-named officer or partner has earned a certificate of completion from a paralegal program that is institutionally accredited but that is not approved by the American Bar Association *(attach copy of certificate of completion).*

AND

The above-named officer or partner has successfully completed a minimum of 24 semester units (or the equivalent) in legal specialization courses *(attach copy of transcript).* Number of semester units completed (or the equivalent)_____

☐ **OPTION 3 - Bachelor's Degree and Experience**

The above-named officer or partner has a bachelor's degree in_____ *(attach copy of diploma).* (List field)

AND Choose One Below:

☐ The above-named officer or partner has completed at least one year of law-related experience working under the supervision of a licensed attorney *(attach original statement on the attorney's letterhead signed by the attorney describing the scope and dates of your experience).*

OR

☐ The above-named officer or partner has completed at least one year of experience providing self-help service as defined by Business and Professions Code § 6400 (d) before January 1, 1999 *(attach original statement describing the scope and dates of your experience).*

☐ **OPTION 4 - High School or General Equivalency Diploma**

Choose One Below:

☐ The above-named officer or partner has a high school diploma *(attach copy of diploma).*

OR

☐ The above-named officer or partner has a general equivalency diploma *(attach copy of diploma).*

AND Choose One Below:

☐ The above-named officer or partner has completed at least two years of law-related experience working under the supervision of a licensed attorney *(attach original statement on the attorney's letterhead signed by the attorney describing the scope and dates of your experience)*.

OR

☐ The above-named officer or partner has completed at least two years of experience providing self-help service as defined by Business and Professions Code § 6400 (d) before January 1, 1999 *(attach original statement describing the scope and dates of your experience)*.

Civil Judgment

This information must be provided for each corporate officer or general partner.
For any corporate officer or general partner who answers "Yes" to a question, please attach a certified copy of each judgment.

1. Has any officer or general partner been held liable in a final judgment or a stipulated judgment entered in a civil action that alleged fraud, the use of an untrue or misleading representation, or the use of an unfair, unlawful or deceptive business practice?

   ☐ **YES** ☐ **NO**

2. Has any officer or general partner had a civil judgment entered against them in an action arising out of negligent, reckless or willful failure to properly perform the obligation as a legal document assistant or an unlawful detainer assistant?

   ☐ **YES** ☐ **NO**

If "YES", please provide the name of corporate officer(s) or general partner(s) for whom judgment information is provided:

_____

_____

Criminal Conviction

This information must be provided for each corporate officer or general partner.
For any corporate officer or general partner who answers "Yes" to a question, please attach a certified copy of each judgment.
(Note: Conviction means a plea or verdict of guilty or a conviction following a plea of nolo contendere. Any conviction dismissed under Penal Code § 1203.4 must be included.)

1. Has any officer or general partner been convicted of a felony?

   ☐ **YES** ☐ **NO**

2. Has any officer or general partner been convicted of a misdemeanor unlawful practice of law or contempt of the authority of a court under Business and Professions Code § 6126 or § 6127?

   ☐ **YES** ☐ **NO**

3. Has any officer or general partner been convicted of a misdemeanor violation of the provisions on legal document assistants and unlawful detainer assistants at Business and Professions Code § 6400-6416?

   ☐ **YES** ☐ **NO**

If "YES", please provide the name of corporate officer(s) or general partner(s) for whom conviction information is provided:

_____

_____

Revocation of Registration / Disbarment or Suspension
This information must be provided for each corporate officer or general partner.

1. Has any officer or general partner had a registration as a legal document assistant or an unlawful detainer assistant revoked by a County Clerk under Business and Professions Code § 6413?

   ☐ **YES** ☐ **NO**

   (If YES, attach certified copy of each revocation)

2. Is any officer or general partner presently disbarred or suspended from the practice of law pursuant to Business and Professions Code § 6100-6117?

   ☐ **YES** ☐ **NO**

If "YES", please provide the name of corporate officer(s) or general partner(s) for whom revocation/disbarment/suspension information is provided as well as the date of their disbarment or suspension:

_____

_____

I declare under penalty of perjury under the laws of the State of California that all information on this application and on all accompanying documents is true and correct.

*Signature:_____

Title: _____

Date:_____

*Signature:_____

Title: _____

Date:_____

*Signature:_____

Title: _____

Date:_____

***Corporate Applicant:**
Application must be signed by the Chairman of the Board or the President, or by any Vice President and the Secretary, any Assistant Secretary, the Chief Financial Officer or any Assistant Treasurer.

***Partnership Applicant**:
Application must be signed by at least one general partner.

(For Office Use Only)

APPROVED: _____ **DATE:** _____
Signature

DENIED: _____ **DATE:** _____
Signature

Comments: _____

_____

_____

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_____