

**THE DEPARTMENT OF FINANCIAL INSTITUTIONS  
30 SOUTH MERIDIAN STREET, SUITE 300  
INDIANAPOLIS, INDIANA 46204**

(Check One)

- APPLICATION TO ESTABLISH A BRANCH OFFICE OR OFFICES OR A TRUST OFFICE
- APPLICATION TO RELOCATE A BRANCH OFFICE OR A TRUST OFFICE
- APPLICATION TO RELOCATE A MAIN OFFICE
- APPLICATION FOR A MOBILE BRANCH

\_\_\_\_\_  
Name of Applicant Date of Application

\_\_\_\_\_  
Address of Main Office

\_\_\_\_\_  
City County State Zip Code

**A. Premises to be occupied as a Branch, Trust Office, Main Office or Mobile Branch**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address (If one has not been assigned, provide description of location.)

\_\_\_\_\_  
City County State Zip Code

\_\_\_\_\_  
Projected Date of Opening or Relocation

- Status of Proposed Site:       Under Option       Owned       Leased  
 Does Proposed Site Meet Existing Zoning Requirements?       Yes       No  
 If above answer is NO, is area to be rezoned?       Yes       No

**Type of Occupancy** (Check all which apply to indicate both type of quarters at opening and contemplated permanent quarters.)

- Permanent quarters leased       Temporary quarters       Permanent quarters owned

**Premises** (\*Should correspond to the most recent Consolidated Report of Condition)

	Present book value*	Projected additions	Proposed book value
Land			
Building			
Construction in progress			
Leasehold improvements			
Furniture, fixtures, equip.			
<b>TOTAL</b>			

**B. Premises to be relocated from (If filing a branch relocation or trust office relocation application)**

\_\_\_\_\_  
Address of Branch relocating from

\_\_\_\_\_  
City County State Zip Code

**If filing a Main Office Relocation Application, will the current main office location be closed or continued to be operated as a branch or trust office?**       Closed       Operated as a branch or trust office

## **GENERAL INFORMATION**

1. Three executed copies of the application are to be filed with the Department. Additional information may be requested. Any clarification as to information necessary to complete this application should be directed to the Department of Financial Institutions, telephone (317) 232-3955.
2. The applicant should contact its primary Federal Regulatory Authority to determine the Federal requirements for the type of application being submitted. Please provide the Department with copies of all correspondence with Federal Regulatory Agencies regarding the application.
3. The applicant will be billed according to the current fee schedule following the review of the application.
4. Attach a listing of the name and address of each existing branch office or trust office of the Applicant in the order in which they were established. Also include those branches or trust offices which are approved but not yet in operation (designate with \*).
5. If the applicant is requesting approval for more than one branch due to a purchase and assumption of more than one branch, only one application is needed. However, Section A must be completed separately for each branch location. Also provide a copy of the Federal application completed for a purchase and assumption transaction.

## **ANSWERS TO THE FOLLOWING QUESTIONS SHOULD BE PROVIDED IN LETTER FORM AND ATTACHED TO THE APPLIICATIONS COVER SHEET**

1. Provide a brief description of the premises to be occupied, services to be offered, and terms of any contracts or leases that will be entered into.
2. If the proposed transaction involves an officer, director or ten (10) percent shareholder, or their interests, please provide details concerning any financial arrangements relating to fees, the acquisition of property, leasing of property, and construction contracts.
3. If any of the proposed branches or trust offices are located in a state other than Indiana, the applicant must provide copies of host state laws which authorize the applicant to establish a branch or trust office in that state. The applicant must also provide a written analysis of the laws verifying that the laws of the host state will not be violated if the branch or trust office is approved.

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE APPLICANT BANK OR TRUST COMPANY**

The Board of Directors (Trustees) of Applicant at a meeting duly called and held on \_\_\_\_\_ adopted the following Resolution:

**WHEREAS**, it is the consensus of this meeting that an application should be made on behalf of this institution to the Department of Financial Institutions, the Federal Deposit Insurance Corporation and/or Federal Reserve Bank, as applicable, for written consent to establish one or more Branches, Trust Office, Mobile Branch, or relocate a Main Office, Branch Office or Trust Office located at \_\_\_\_\_ (Address) in accordance with the provisions of State law and Federal statutes.

**NOW, THEREFORE, IT IS RESOLVED**, that the President or Vice President and the Cashier or Secretary are hereby authorized and directed to make application on behalf of this institution to the Indiana Department of Financial Institutions, and appropriate Federal Agency, to establish one or more Branches, Trust Office, Mobile Branch, or relocate a Main Office, Branch Office or Trust Office. The officers are further authorized to provide information on forms obtained from them, in connection therewith information on the several factors enumerated in the State and Federal statutes and to provide such assurance as may be required by the Department of Financial Institutions or appropriate Federal Agency.

The above Resolution has not been rescinded or modified and has been duly entered in the minute book of the Applicant institution.

It is respectfully requested that the Department of Financial Institutions, and if appropriate, the applicable Federal Agency, conduct or cause to be made the necessary investigation for the purpose of determining whether this application should be approved or disapproved.

Date

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
City County State Zip Code  
(Institution Seal in Space Below)

ATTEST:

\_\_\_\_\_  
President or Vice President

\_\_\_\_\_  
Cashier or Secretary