



STATE OF CONNECTICUT  
DEPARTMENT OF BANKING

260 CONSTITUTION PLAZA • HARTFORD, CT 06103-1800



**APPLICATION BY A FOREIGN BANK FOR A LICENSE  
FOR A REPRESENTATIVE OFFICE**

**Section 1 - General Information.**

1. This application must be under oath and is to be used by a foreign bank which seeks a license under Section 36a-428g of the Connecticut General Statutes to establish or maintain a representative office in Connecticut.
2. Applicant should submit the following information and documents to the State of Connecticut, Department of Banking:
  - (a) for a license to establish or maintain a representative office by an applicant that does *not* currently maintain a state branch or state agency in Connecticut, the information and documents required by Section 3 of this form.
  - (b) for a license to establish or maintain a representative office by an applicant that currently maintains a state branch or state agency in Connecticut, the information and documents required by Section 3 Parts A. 1-4, D, E, F. 1-3 and 5-7 of this form.
3. A non-refundable license fee of \$400 payable to the order of "Treasurer, State of Connecticut" should accompany the application.
4. The Department of Banking reserves the right to require additional information in connection with the application. The applicant may submit any information in addition to that required which it deems pertinent to the application.
5. The application may be filed in the form that such application is filed with the Board of Governors of the Federal Reserve System, provided that the applicant includes with the application a cross reference sheet indicating where in the federal application the information required under each item of this form is located; and provided further that any information, documents or exhibits not required in the federal application but required in this form are included in the application or in a supplement to the application.
6. Copies of any additional material filed as part of a concurrent application to the Board of Governors of the Federal Reserve System also should be submitted to the Department of Banking.

7. You are reminded that portions of this application may be subject to disclosure to the public under the Connecticut Freedom of Information Act. Applicants may, for good reason, request that certain portions of the application be held confidential. Such information should be placed in a separate section of the application marked “**Confidential**” together with the reasons supporting the applicant’s request for confidential treatment. The main application should note that such information is contained in the confidential portion of the application. The decision as to whether such material will be held confidential, however, will be at the discretion of the Banking Commissioner.
8. All documents submitted in foreign language originals must be accompanied by certified translations into the English language.
9. All documents required to be acknowledged may be acknowledged outside of the United States before an ambassador, minister, charge d’affaires, counselor to or secretary of a legation, consul general, consul, vice-consul, commercial attache, or consular agent of the United States accredited to the country where the acknowledgment is made, a notary public of the country where the acknowledgment is made, a judge or clerk of a court of record of the country where the acknowledgment is made, or in the case of an instrument pertaining to real property located in this state or a power of attorney by any attorney admitted to the bar in this state. If the acknowledgment is taken without the United States and by a notary public or a judge or clerk of a court of record of the country or the clerk of the town where the acknowledgment is taken, the certificate shall be authenticated by a certificate under the great seal of state of the country, affixed by the custodian of such seal, or by a certificate of a diplomatic, consular or commercial officer of the United States accredited to that country, certifying as to the official character of such officer. The officer authenticating an acknowledgment shall endorse thereon or attach thereto a certificate in substantially the following form:

State of .... County of ....

I .... (judge or clerk) of the .... in and for said county, which court is a court of record, having a seal, (or I, clerk of the town of .... in said county,) do hereby certify that .... by and before whom the foregoing (or annexed) acknowledgment was taken, was at the time of taking the same a notary public (or other officer) residing (or authorized to act) in said county, and was authorized by the laws of said state to take and certify acknowledgments in said state, and, further, that I am acquainted with his/her handwriting and that I believe that the signature to the certificate of acknowledgment is genuine.

In testimony whereof I have hereunto set my hand and affixed the seal of the court this .... day of ....., 200....

Alternatively, documents may be legalized in accordance with **Exhibit A**, Legalization of Foreign Documents.

10. This is not a blank form to be filled in. It is a guide to be used in preparing the application. Any application prepared in accordance with this form should refer to the item numbers listed when supplying the information requested therein.

## **Section 2 - Prior Consultation.**

Preparation of the data and documents to be filed in connection with an application will be facilitated by prior consultation between the applicant and representatives of the Department of Banking. Arrangements for such a conference may be made through the Legal Division, State of Connecticut, Department of Banking, 260 Constitution Plaza, Hartford, Connecticut 06103-1800, telephone (860) 240-8140.

## **Section 3 - Documents/Information required.**

### **Part A. Description of the Applicant**

1. Full name of applicant.
2. Principal place of business of applicant.
3. Proposed representative office address(es).
4. List the names of and provide biographical information in the form attached as **Exhibit B** hereto for each person who shall act as a representative of the applicant, and complete the Authorization to Release Information attached thereto.
5. Describe the history and background of the applicant, including the following:
  - (a) brief history of the applicant;
  - (b) ranking by asset size in the home country;
  - (c) number of offices in the United States, home country, and worldwide.
  - (d) organization structure of the applicant (including shareholders directly or indirectly owning or controlling 10% or more of the capital stock of the applicant, its affiliates<sup>1</sup> and any agencies, branches or representative offices of the applicant in the United States and other countries);

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<sup>1</sup> “**Affiliate**” means any company that controls, is controlled by or is under common control with the company. “**Control**” means directly or indirectly owning, controlling or holding with power to vote 25% or more of any class of voting stock, or the ability in any manner to elect a majority of the directors of a company.

- (e) management structure, including board of directors and principal officers of the applicant; and
  - (f) description of the business of the applicant.
6. Provide a brief background (bio-date/resume) of members of the board of directors and principal officers of the applicant.
  7. Provide an organization chart for the applicant and any top tier holding company that owns or controls the applicant showing all affiliates<sup>2</sup> and the place where each company on the chart is organized and located.

**Part B. Financial Information**

1. Provide the following financial statements:
  - (a) a consolidated statement of the applicant's financial condition as of a date within ninety days prior to the date of application or as of the end of its most recent fiscal quarter, whichever is later, certified by the applicant's chief executive or financial officer, and prepared in accordance with the instructions attached hereto as **Exhibit C**;
  - (b) audited consolidated financial statements, including statements of income and expense, for the applicant's latest three fiscal years or for the period that applicant has been in business if less than three years, certified by the applicant's chief executive or financial officer, with amounts to be shown in the applicant's local currency and the United States dollar equivalent;
  - (c) detailed calculation of applicant's risk-based capital ratio using the guidelines of the Bank for International Settlements as of the statement date in subparagraph (a) above; and
  - (d) a copy of the applicant's latest annual report.
2. Provide an analysis of loans, reflected as assets in Exhibit C, including, but not limited to, information on delinquencies, nonaccrual loans, assets acquired in satisfaction of debts previously contracted, and loans with reduced interest charges.
3. Provide an analysis of the extent of country risk exposure of the applicant.
4. List at least fifteen (15) of the major United States and other correspondent bank relationships of the applicant, together with the complete address and contact person of such banks, a list of United States and other banks which have extended any lines of credit to the applicant and the amount of such lines.

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<sup>2</sup> "Affiliate" and "Control" shall each have the meaning set forth in Section 3, Part A.5(d).

### **Part C. Description of the Applicant's Home Country**

1. Provide a summary profile of the applicant's home country, including a description of:
  - (a) political and economic structure;
  - (b) economic ties with Export-Import Bank, International Monetary Fund, World Bank and other similar organizations;
  - (c) foreign trade, including balance of payments with the United States and other countries; and
  - (d) foreign exchange restrictions, if any.
  
2. Describe the bank regulatory system in the home country of the applicant and, if different, in the home country of any top tier holding company that owns or controls<sup>3</sup> the applicant, addressing in each case:
  - (a) the extent to which the foreign bank or holding company is subject to comprehensive supervision or regulation on a consolidated basis by its home country authorities, including whether each foreign bank or holding company is supervised or regulated in such a manner that its home country supervisor receives sufficient information on the worldwide operations of the foreign bank or holding company (including the relationships of the foreign bank or holding company to any affiliate<sup>4</sup>) to assess the overall financial condition and compliance with law and regulation of the foreign bank or holding company;
  - (b) the powers and functions of the home country authorities;
  - (c) the frequency and scope of supervisory examinations of banking institutions by the home country authorities;
  - (d) the function of the Central Bank and its relationship to private banking institutions in the home country;
  - (e) the deposit insurance system, if any, in the home country; and
  - (f) the extent to which banking institutions from other countries are permitted to conduct business in the home country.

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<sup>3</sup> “Control” shall have the meaning set forth in Section 3, Part A.5(d).

<sup>4</sup> “Affiliate” shall have the meaning set forth in Section 3, Part A.5(d).

3. Provide the complete address of regulatory authorities in the home countries referred to in paragraph 2 above and in countries where the applicant has a presence.

**Part D. Activities of Representative Office**

1. Describe the types of activities to be conducted, and, if applicable, the types of business to be solicited at the proposed representative office.
2. Describe the staffing of the office and the manner in which the office will be supervised by the applicant, including the number of persons to be employed, their capacities, and names and brief biographies of key personnel other than representatives.

**Part E. Convenience and Needs**

Provide a statement containing factual data to demonstrate that the convenience and needs of persons to be served by the proposed representative office will be promoted by approval of the application.

**Part F. Exhibits**

The following documents shall be submitted as exhibits to this form:

1. A duly executed and acknowledged application certificate in the form attached hereto as **Exhibit D**.
2. A certified copy of resolutions of applicant's board of directors either sworn to before a United States consular official or legalized in accordance with **Exhibit A**:
  - (a) authorizing the filing of the application and designating the officer who is to sign the application;
  - (b) designating the person or persons who is/are to be the representative(s) of the applicant or who shall be authorized to appoint such person or persons;
3. Evidence of compliance with Section 33-920 or 33-1210 of the Connecticut General Statutes or, if applicable, evidence of compliance with Section 33-923 or 33-1213 of the Connecticut General Statutes.
4. Two copies of applicant's charter or articles of incorporation and bylaws, or the equivalent thereof, and all amendments thereto duly authenticated by the proper officer of the applicant.

5. An opinion of a member of the bar of the applicant's home country that:
  - (a) applicant's charter or articles of incorporation authorizes it to conduct the activities contemplated by the representative office; and
  - (b) the application complies with the laws of the applicant's home country.
6. A certificate signed by a senior executive officer of the applicant certifying that the applicant is conducting its business as authorized by its charter or articles of incorporation and bylaws and in compliance with the laws of its home country.
7. A statement from the home country authorities that:
  - (a) such authorities do not object to the establishment of the proposed representative office; and
  - (b) the applicant is duly organized and licensed to conduct a general banking business and is in good standing.
8. A taxpayer identification form attached hereto as **Exhibit E**.

(Revised 7/17/2000)

**LEGALIZATION OF FOREIGN DOCUMENTS**

**General statement.** Documents submitted to the Department of Banking executed in a foreign country which is a party to the Hague Convention Abolishing the Requirement of Legalization for Foreign Public Documents may be legalized in accordance with the Convention procedure for having a foreign document legalized. Each country which is a party to the Convention designates the authority or authorities who may certify public documents. A certification, also known as an apostille, is affixed to the document by the competent local authority of the foreign country where the document originated. The form of the apostille is set forth in this form as set forth in the Convention. The Department of Banking will rely on opinions of counsel or other appropriate evidence from parties seeking to use this method of legalizing documents that the country in which the documents originate is a party to the Convention, and that the document has been certified by an authority designated to certify public documents.

**Model form of apostille.** The certificate will be in the form of a square with sides at least 9 centimetres long.

APOSTILLE (Convention de La Haye du 5 octobre 1961)	
1. Country _____	
2. This public document has been signed by _____	
3. Acting in the capacity of _____	
4. Bears the seal/stamp of _____ _____	
Certified	
5. at _____	6. the _____
7. by _____	
8. No. _____	
9. Seal/stamp _____	10. Signature _____
_____	_____



**BIOGRAPHICAL INFORMATION**

(Please print or type)

**Please answer all questions, using “No”, “None”, or “Not Applicable” where necessary.**

1. Full Name: \_\_\_\_\_  
  First  Middle  Last

Soc. Sec. No.: \_\_\_\_\_

Have you ever been known by, or used, any other name? If so, list such name(s):

2. Home Address:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long at this address \_\_\_\_\_

3. Previous Home Address (immediately prior to present address):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long at this address \_\_\_\_\_

4. Present Occupation: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Name of Immediate Superior: \_\_\_\_\_

5. Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Citizenship: \_\_\_\_\_ Right-to-Work in USA Yes ( ) No ( )  
Passport No. \_\_\_\_\_ Visa Type: \_\_\_\_\_  
Country of Issue: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

6. Marital Status: Single ( ) Married ( ) Divorced ( ) Separated ( )

If married, give name of spouse, including maiden name: \_\_\_\_\_

Date and place of spouse's birth: \_\_\_\_\_

Spouse's Social Security Number: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Country of Issue: \_\_\_\_\_

Dependents:

Name (first, middle initial, last)	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

If Deceased, Date and Place of Death: \_\_\_\_\_ If Deceased, Date and Place of Death: \_\_\_\_\_

8. Service in Armed Forces

(a) Have you ever served in the Armed Forces of the United States? Yes    No  
( )    ( )

If yes, branch of Armed Forces: \_\_\_\_\_

(b) Date of entry to active service: \_\_\_\_\_

(c) Service serial number: \_\_\_\_\_

(d) Have you ever received a discharge from the Armed Forces which was other than honorable? Yes    No  
( )    ( )

If yes, please provide a full explanation, including the type of discharge, and when and where issued.

9. Education	Name and Address of School	Dates of Attendance	Major Area of Study	Degree Granted and Date Awarded
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High School

College, University  
(Undergraduate)

College, University  
(Graduate)

Professional or  
Technical School

10. Do you have a license to practice any profession? Yes    No  
( )    ( )  
If "yes," give details:

(a) Nature of License: \_\_\_\_\_

(b) Date issued: \_\_\_\_\_ Number of license (if any): \_\_\_\_\_

(c) Licensing Agency and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Employment Record (for the 15-year period preceding date of present application) (use additional sheets if necessary); account for all gaps in employment.

<u>Name and Address of Employer</u>	<u>Dates of Employment</u>	<u>Position Held &amp; Duties</u>	<u>Immediate Supervisor</u>	<u>Reason for Leaving</u>
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12. If self-employed, describe each enterprise, including the name, address, state of incorporation, your percentage of ownership and the type of business of each corporation or other entity which you own or control. (Control means ownership of 10% or more of the stock or the ability to effectively control the management of the corporation or other entity.)

List names, addresses and percentage of control and/or ownership of other incorporators, partners, directors or officers of the entity or corporation referred to above.

13. Are you employed in any professional capacity, or do you perform any services for or have any business connections with any institution which is subject to the supervision of the State of Connecticut, Department of Banking, or any agency or authority of the State of Connecticut?

Yes      No  
( )      ( )

If "yes," indicate name of institution, address and nature of your work.

14. Have you had, or do you now have, any financial interest, direct or indirect, in any institution under the supervision of any authority or agency in Connecticut, or any other state?

Yes      No  
( )      ( )

If "yes," give name of institution, address and nature of interest.

15. References:

- (a) List the names and addresses of three personal references who can attest to your character, fitness and reputation. (State how long you have known each person. Do not include relatives or current business associates.)

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- (b) List the names and addresses of three professional references who can attest to your character, fitness, reputation, professional competence and business skills.

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16. List outstanding debts in excess of \$10,000. (Use additional sheets if necessary.)

Name and Address of Creditor	Account Number	Date	Credit Limit Amount	Balance Outstanding
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17. Answer "yes" to any of these questions if they apply to you as an individual, or as partner, director or officer of a corporation or partnership.

Except for minor traffic violations:

- |  |            |           |
|--|------------|-----------|
| (a) Are any arrests, indictments, criminal information or other criminal proceedings now pending against you?  | Yes<br>( ) | No<br>( ) |
| (b) Were you ever convicted for any violation of law?  | Yes<br>( ) | No<br>( ) |
| (c) Have you or has any partnership of which you were a member or any corporation of which you were a principal officer or major stockholder ever been adjudged a bankrupt or involved in a civil action either as defendant or plaintiff? | Yes<br>( ) | No<br>( ) |
| (d) Have you ever been named in any administrative or disciplinary proceedings?  | Yes<br>( ) | No<br>( ) |
| (e) Has your salary ever been garnished?   | Yes<br>( ) | No<br>( ) |

(f) Have you ever been sued or has any judgment been obtained against you in any civil action in any jurisdiction? Yes No  
( ) ( )

If your answer to any of the above questions is "yes", on a separate sheet of paper, list the dates, name and location of the court of jurisdiction or administrative agency and a brief description of each action or charge and its disposition. Report all legal actions, regardless of disposition.

18. Has any enterprise in which you were a partner, director or officer been the subject of federal or state or foreign country administrative proceedings, criminal indictment, criminal information or other criminal proceeding? Yes No  
( ) ( )

19. Have you and any enterprise in which you are a partner filed federal, state or local tax returns for any of the previous three calendar years? Yes No  
( ) ( )

If "no", please explain the circumstances and include the date on which any applications for extension have been filed.

The undersigned affirms that the statements made and answers given herein are accurate and complete, and hereby authorizes the State of Connecticut, Department of Banking to make any inquiry it deems appropriate in connection with processing this form. False written statements in this form are punishable under Section 53a-157b of the Connecticut General Statutes (making a punishable false written statement) and also will be sufficient cause for denial of a license or charter by the State of Connecticut, Department of Banking.

Date \_\_\_\_\_ Signature \_\_\_\_\_

State of \_\_\_\_\_  
County of \_\_\_\_\_

On this the \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_, before me, \_\_\_\_\_,  
the undersigned officer, personally appeared \_\_\_\_\_, known to me  
(or satisfactorily proven) to be the person whose name \_\_\_\_\_  
subscribed to the within instrument and acknowledged that \_\_\_\_\_  
he/she \_\_\_\_\_ executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand.

(SEAL)

\_\_\_\_\_  
\_\_\_\_\_  
Title of Officer

**AUTHORIZATION TO RELEASE INFORMATION**

TO WHOM IT MAY CONCERN:

I hereby authorize any duly authorized representative of the State of Connecticut, Department of Banking (CDOB) bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to any professional license awarded to me (including any grievance records), employment, military, educational records (including, but not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records), credit records, and law enforcement records (including, but not limited to any record of charge, prosecution or conviction for criminal or civil offenses). I hereby direct you to release such information upon request to the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the CDOB. Consent is granted for the CDOB to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as the custodian of such records, your employers, officers, employees, and related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I am furnishing my Social Security Account Number on a voluntary basis. Should there be any question as to the validity of this release, you may contact me as indicated below.

I have read the above release and agree to the terms and conditions therein.

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent or Guardian (if required): \_\_\_\_\_

Current Address \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_

CPA/Bar Membership(s): State \_\_\_\_\_ Registration Number \_\_\_\_\_

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Full Name: \_\_\_\_\_  
(Typed or printed, include maiden and any other previously-used name)

STATE OF  
COUNTY OF

On this the \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_, before me, \_\_\_\_\_, the undersigned officer, personally appeared \_\_\_\_\_, known to me (or satisfactorily proven) to be the person whose name \_\_\_\_\_ subscribed to the within instrument and acknowledged that \_\_\_\_\_ he/she \_\_\_\_\_ executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand.

(SEAL)

\_\_\_\_\_  
\_\_\_\_\_

Title of Officer

## INSTRUCTIONS

This statement of the financial condition of your institution should be prepared as of a date within ninety (90) days prior to the date of application or as of the end of its most recent fiscal quarter, whichever is later, for any license. Please prepare this statement in duplicate and send it with the application for the license to the Banking Commissioner, State of Connecticut, Department of Banking, 260 Constitution Plaza, Hartford, Connecticut 06103-1800. If applications are to be filed simultaneously for more than one license, only one statement of condition and the duplicate need be filed. If there is no amount to be reported after any printed caption, insert the word "None".

1. It is requested that the statement form be carefully reviewed before preparing the figures, and that all assets, liabilities and capital accounts be segregated and reported in the appropriate printed titles, wherever possible. If you have items which cannot properly be classified under these titles, use the additional lines, and indicate clearly the nature of each such item by attaching explanations where necessary.
2. All "reserves" or "provisions" should be analyzed and reported as follows:
  - (a) Reserves or provision for known or expected losses on assets should be deducted from such asset accounts;
  - (b) Reserves or provision for known or expected liabilities should be reported in items 36, 37, or 39, as the case may be; and
  - (c) Reserves or provision for future contingencies or unforeseen losses should be included in item 48.
3. Include in item 3 only balances on deposit by your institution with other banks. Do not include overdrafts by other banks in their accounts with your institution, or "call loans" or other extensions of credit to them. All such advances should be included as loans on item 6, or should be reported separately below item 15, with appropriate explanations.
4. Include in item 4 all obligations of national governments, such as short term "treasury bills" discounted, as well as bonds or other securities issued by them. Securities included in both items 4 and 5 should be reported at net book values, less the allocated "reserves" or "provisions." The current market value (as of the statement date) must also be reported in the footnote to the statement.
5. Include in item 47 all "reserves" or "surplus" paid in or accumulated from prior periods, and all net profits carried forward at previous closings of the books, less expenses and losses incurred since the latest closing of the books, should also be included in this item.
6. Unpaid dividends, including amounts actually declared by the directors out of current or prior profits, should be included in item 39.
7. All "per contra" accounts such as "collections for account of customers," "securities held for account of customers," "customers' liability on letters of credit," "guarantees," etc., should be omitted from the face of the statement, but should be reported on the reverse side as "contingent assets and liabilities."



Statement to the Banking Commissioner of the State of Connecticut of the assets and liabilities of the

Name of Bank \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 200 \_\_\_\_\_

	<b>ASSETS</b>	<b>FOREIGN AMOUNT</b>	<b>*CONVERSION RATE</b>	<b>DOLLARS</b>
1.	Cash on hand (currency, coin, and bullion)	_____	_____	_____
2.	Exchanges and checks for next day's clearings	_____	_____	_____
3.	Deposits in other banking institutions (see Instruction 3)	_____	_____	_____
4.	Securities of National Governments** (see Instruction 4)	_____	_____	_____
5.	Other readily marketable securities** (see Instruction 4)	_____	_____	_____
6.	Loans and discounts, including overdrafts and mortgages	_____	_____	_____
7.	Bills rediscounted or sold with endorsement	_____	_____	_____
8.	Customers' liability on acceptances	_____	_____	_____
9.	Investments in banking premises, furniture and fixtures	_____	_____	_____
10.	Investments in affiliated and subsidiary companies	_____	_____	_____
11.	Loans and advances to affiliated and subsidiary companies	_____	_____	_____
12.	Accrued interest and commissions receivable	_____	_____	_____
13.	Inter-branch accounts	_____	_____	_____

Statement to the Banking Commissioner of the State of Connecticut of the assets and liabilities of the

Name of Bank \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 200 \_\_\_\_\_

	<b>ASSETS</b>	<b>FOREIGN AMOUNT</b>	<b>*CONVERSION RATE</b>	<b>DOLLARS</b>
14.	Other cash items	_____	_____	_____
15.	Other assets	_____	_____	_____
16.		_____	_____	_____
17.		_____	_____	_____
18.		_____	_____	_____
19.		_____	_____	_____
20.		_____	_____	_____
21.		_____	_____	_____
22.		_____	_____	_____
23.		_____	_____	_____
24.		_____	_____	_____
25.	<b>TOTAL ASSETS</b>	_____	_____	_____

Statement to the Banking Commissioner of the State of Connecticut of the assets and liabilities of the

Name of Bank \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 200 \_\_\_\_\_

	<b>LIABILITIES AND CAPITAL ACCOUNTS</b>	<b>FOREIGN AMOUNT</b>	<b>*CONVERSION RATE</b>	<b>DOLLARS</b>
26.	Deposits secured by pledge of assets	_____	_____	_____
27.	Deposits of National Governments and political subdivisions	_____	_____	_____
28.	Deposits of banking institutions	_____	_____	_____
29.	Other demand deposits, including certified and officers' checks	_____	_____	_____
30.	Other time deposits, including certificates of deposit and savings accounts	_____	_____	_____
31.	Total deposits (total of items 26 to 30 inclusive)	_____	_____	_____
32.	Currency in circulation	_____	_____	_____
33.	Bills rediscounted or sold with endorsement	_____	_____	_____
34.	Other liabilities for borrowed money, however represented	_____	_____	_____
35.	Acceptances outstanding	_____	_____	_____
36.	Accrued interest, taxes and expenses payable	_____	_____	_____
37.	Unearned interest and commissions	_____	_____	_____
38.	Inter-branch accounts	_____	_____	_____
39.	Other liabilities	_____	_____	_____

Statement to the Banking Commissioner of the State of Connecticut of the assets and liabilities of the

Name of Bank \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 200 \_\_\_\_\_

	<b>LIABILITIES AND CAPITAL ACCOUNTS</b>	<b>FOREIGN AMOUNT</b>	<b>*CONVERSION RATE</b>	<b>DOLLARS</b>
40.		_____	_____	_____
41.		_____	_____	_____
42.		_____	_____	_____
43.		_____	_____	_____
44.		_____	_____	_____
45.	TOTAL LIABILITIES (total of items 31 to 44 inclusive)	_____	_____	_____
46.	Capital stock	_____	_____	_____
47.	Surplus and undivided profits (see Instruction 5)	_____	_____	_____
48.	Reserves for contingencies (see Instruction 2)	_____	_____	_____
49.	TOTAL CAPITAL ACCOUNTS (items 46 to 48, inclusive)	_____	_____	_____
50.	TOTAL LIABILITIES AND CAPITAL (item 45 plus item 49)	_____	_____	_____

\*Conversion rate should be as of the date of the statement

\*\*Current market value of:

(Item 4) Securities of National Governments

(Item 5) Other readily marketable securities

FOREIGN AMOUNT

DOLLARS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Statement to the Banking Commissioner of the State of Connecticut of the assets and liabilities of the

Name of Bank \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 200 \_\_\_\_\_

The undersigned affirms that the statements made and answers given herein are accurate and complete, and hereby authorizes the State of Connecticut, Department of Banking to make any inquiry it deems appropriate in connection with processing this form. False written statements in this form are punishable under Section 53a-157b of the Connecticut General Statutes (making a punishable false written statement) and also will be sufficient cause for denial of a license or charter by the State of Connecticut, Department of Banking.

Date \_\_\_\_\_ Signature \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

On this the \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_, before me, \_\_\_\_\_, the undersigned officer, personally appeared \_\_\_\_\_ who acknowledged himself to be the \_\_\_\_\_ of \_\_\_\_\_, a corporation, and that he/she, as such \_\_\_\_\_, being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by himself/herself as \_\_\_\_\_.

In witness whereof I hereunto set my hand.

(SEAL)

\_\_\_\_\_  
\_\_\_\_\_  
Title of Officer

**APPLICATION CERTIFICATE OF FOREIGN BANK FOR A  
LICENSE TO ESTABLISH OR MAINTAIN A  
REPRESENTATIVE OFFICE IN THE STATE OF CONNECTICUT**

To: The Banking Commissioner of the State of Connecticut  
Hartford, Connecticut

\_\_\_\_\_ is a foreign bank duly organized  
and existing under the laws of \_\_\_\_\_ and is authorized by its  
charter or articles of incorporation to transact the business of accepting deposits and making loans.  
Pursuant to a duly adopted resolution of its board of directors, \_\_\_\_\_ hereby  
makes application for a license to establish or maintain a representative office in the State of  
Connecticut and authorizes \_\_\_\_\_, its \_\_\_\_\_, to  
subscribe and acknowledge this application.

Date: \_\_\_\_\_ 200\_\_

(Applicant) \_\_\_\_\_

By: \_\_\_\_\_ (Title) \_\_\_\_\_

(SEAL)

**A C K N O W L E D G M E N T**

State of \_\_\_\_\_

County of \_\_\_\_\_

On this the \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_, before me, \_\_\_\_\_,  
the undersigned officer, personally appeared \_\_\_\_\_ who  
acknowledged himself/herself to be the \_\_\_\_\_ of \_\_\_\_\_,  
a corporation, and that he/she, as such \_\_\_\_\_,  
being authorized so to do, executed the foregoing instrument for the purposes therein contained,  
by signing the name of the corporation by himself/herself as \_\_\_\_\_.

In witness whereof I hereunto set my hand.

(SEAL)

\_\_\_\_\_  
\_\_\_\_\_  
Title of Officer

**TAXPAYER IDENTIFICATION INFORMATION**

Disclosure of this information by you is mandatory in order to complete the processing of your application. The authority to request personal information from you, including identifying numbers, and the authority to maintain such information is found in Section 4a-79 of the Connecticut General Statutes.

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(Print or Type information in blocks provided)  
(This form may be reproduced as necessary)

1. Name of applicant: \_\_\_\_\_
  
2. Trade name (Doing business as in license or application)  
\_\_\_\_\_
  
3. Address in the United States of business (to be licensed or authorized)  
\_\_\_\_\_  
\_\_\_\_\_
  
4. Federal Employer Identification Number or, if unavailable, reason or reasons for unavailability: \_\_\_\_\_