

APPLICATION TO ESTABLISH AND OPERATE
A FIXED OR MOBILE BRANCH
(Title 6 O.S. §§ 501.1 and 501.2)
(O.A.C. § 85:10-9-2)



OKLAHOMA STATE BANKING DEPARTMENT
2900 N. LINCOLN BLVD.
OKLAHOMA CITY, OKLAHOMA 73105

Name of Applicant _____

Address (Main Office) _____
Street City State Zip

Date of Application _____

*REQUESTS FOR ADDITIONAL INFORMATION OR OTHER COMMUNICATIONS
ABOUT THIS APPLICATION SHOULD BE DIRECTED TO:*

Name _____ Title _____

Address _____
Street City State Zip

Telephone No. () _____ Fax No. () _____

E-mail Address _____

Answer all parts of this application. If additional space is needed, please supplement with additional pages and with a clear reference in the space provided to the supplemental page(s). If any part of the application does not apply, write "n/a".

1. Type Of Facility: De Novo Acquired
- Fixed Branch Fixed Branch
- Mobile Branch Interstate Branch
- Interstate Branch

2. Location of proposed branch: For a mobile branch, list all locations to be serviced by mobile branch. (Attach additional pages, if necessary).

Street _____ City _____

County _____ State _____ Zip Code _____

3. For a mobile branch: Attach copies of documents disclosing an ownership or leasehold interest in the property to be serviced by mobile branch.

Proposed name to be used for advertising the branch (Must comply with Title 6 O.S. §1417):

4. Describe all other related applications submitted in connection with this proposal (merger, purchase and sale, other branches, etc.):

5. Location of all branches that the applicant operates other than the branch proposed in this application. Include locations being serviced by mobile branches. (Attach additional pages, if necessary).

Location (City or Town)	Type of Facility
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

FIXED ASSET EXPENDITURES

TEMPORARY FACILITY

6. Are temporary quarters anticipated? _____ Yes. _____ No. If yes, complete the following:

Street Address _____

Distance from the Permanent Facility: _____ (Note, this address must be within 1,000 feet of the location of the proposed permanent branch, and this temporary branch must be scheduled to permanently close not later than 1 year after the temporary branch is first opened.)

Description of Temporary Facility: _____

Total Cost or Monthly Rental of Temporary Facility: _____

MOBILE FACILITY

7. Mobile facility is ___ Owned _____ Leased Total Cost or Monthly Rental: \$ _____

License Number of mobile facility: _____

Description of mobile facility: _____

PERMANENT FACILITY

8. Description of Facility _____

This facility will be _____ Owned _____ Leased		TOTAL COST
IF OWNED	Land	
	Building	
	Furniture and Equipment	
	TOTAL FIXED ASSET EXPENDITURE	
IF LEASED	Leasehold Improvements	
	Furniture and Equipment	
	TOTAL FIXED ASSET EXPENDITURE	

Terms of Lease (Include renewal or purchase options) NOTE: If no formal lease had been entered into, outline below or in an attachment the Applicant’s plans for providing a facility and its plans for arriving at the terms and conditions of a future feasible lease agreement. If an insider is a party to any lease contract submitted in connection with this application, explain the manner in which lease payments were determined. *Submit an executed copy of lease or other contract for the confidential use of the State Banking Department.*

STATUTORY AND REGULATORY FACTORS

9. In the space below or in an attachment, indicate how the proposal complies with applicable state law governing the establishment of branch offices (see Title 6 O.S. Sections 501.1 and 501.2 and Banking Board Rule 85:10-9-2).

10. Interstate Branch Establishment - In the space below or in an attachment, indicate how the proposal complies with applicable state and federal laws governing the establishment of interstate branches (see Title 6 O.S. Section 501.1).

Also, attach a copy of current host state law relating to interstate branching.

11. If the proposed branch will be located on real property owned by the bank, has Applicant obtained the prior written approval of the Commissioner to purchase the real estate as required by Title 6 O.S. Section 414(A)(4)?

_____ Yes. _____ No.

If yes, attach a copy of the letter. If no, attach a letter requesting approval to purchase the real estate. This letter should provide the legal description and street address of the property and the projected purchase price. Also provide the current general ledger balances of fixed asset accounts and Tier 1 capital plus loan loss allowance.

12. Will the projected cost of the facility result in an investment in fixed assets that exceeds the limit of Title 6 O.S. Section 414(A)?

_____ Yes. _____ No.

13. Will the projected cost of the facility result in an investment in fixed assets that exceeds the limitation imposed by a letter previously issued to your bank by this office under Title 6 O.S. Section 414(A)?

_____ Yes. _____ No.

If yes to either (4) or (5), attach a letter requesting approval of the excess investment (see Title 6 O.S. Section 414(A)). This letter should indicate the projected costs of land, building, equipment, capitalized leases and/or leasehold improvements for the proposed relocated office, current general ledger balances of fixed asset accounts, including property acquired for future expansion, and all booked and unbooked portions of construction accounts.

14. Will the bank own the building and lease space to others for non-bank use?

_____ Yes. _____ No. If yes, approximate percentage of total building space to be leased to others: _____.

15. Describe how the bank proposes to finance the cost of the banking house or other fixed assets in connection with the application, other than carrying same as a bank asset. If a loan is involved, provide details.

RELATIONSHIPS AND ASSOCIATIONS WITH APPLICANT

16. Are any architects, real estate brokers, sellers or lessors of land, buildings or equipment otherwise directly or indirectly associated with applicant? ___Yes ___No. If yes, complete the following table.

Name	Item (Mark Appropriate Column)			Relationship Or Association With Applicant (Specify Director, Officer, 5% Stockholder, or their relatives. Designate any business interests of the aforementioned.)
	Land	Building	Equipment	

17. If fixed or mobile assets are to be purchased from a related party, evidence of the reasonableness of the cost(s) must be provided. Attach copies of recent bids, independent appraisals, or comparable purchases or leases in the area and/or other supporting evidence for the confidential use of the State Banking Department. Also attach a copy of the board resolution approving details of the transaction with the related party.

FEES PAID IN CONNECTION WITH THE APPLICATION

Name Of Recipient	Type Of Fees Paid (Mark Appropriate Column)			Relationship Or Association With Applicant (Specify Director, Officer, 5% Stockholder, or their relatives. Designate any business interests of the aforementioned.)	Amount
	Legal	Consulting	Other		

18. Outline changes in senior management which have occurred since the last examination.

19. For a de novo branch: Attach to this application a balance sheet for applicant as of the most recent month end.

20. For an acquired branch (resulting from a merger or a purchase and sale transaction): Attach to this application a pro forma balance sheet for the applicant as of the end of the most recent quarter, reflecting the proposed acquisition.

21. Indicate the amount of fixed assets shown on page 3 of this application which are already capitalized and included on the attached balance sheet.

FUTURE EARNINGS PROSPECTS DATA

ESTIMATED AVERAGE DEPOSITS FOR THE PROPOSED FACILITY

INSTRUCTIONS: Average deposits for the second, third and fourth years are computed by adding figures at the end of the preceding year to the totals at the end of the subject year and dividing by two. Round all amounts to nearest thousand.

AVERAGE DURING

DESCRIPTION	1 ST YEAR	2 ND YEAR	3 RD YEAR	4 TH YEAR
AVERAGE DEPOSIT VOLUME:				
A. Demand deposits				
B. Interest bearing deposits				
Total estimated average deposit volume (A plus B)				

ESTIMATED INCOME AND EXPENSES FOR THE PROPOSED FACILITY

INSTRUCTIONS: Gross income is calculated by multiplying the estimated average deposit volume above by the bank-wide rate of gross earnings to average assets for the latest available year. ANY DEPARTURE FROM THIS FORMULA MUST BE EXPLAINED IN THE COMMENTS SECTION ON PAGE 7. Round all amounts to the nearest thousand.

ESTIMATED AMOUNT

DESCRIPTION	1 ST YEAR	2 ND YEAR	3 RD YEAR	4 TH YEAR
1. Gross Income (@ %)				
EXPENSES:				
Salaries and employee benefits				
Interest on time and savings deposits (@ %)				
Net occupancy expense (details on page 7)				
Furniture and equipment (depreciation, rental, etc.)				
Provision for loan losses				
Other operating expenses:				
Advertising				
Stationery and supplies				
Telephone				
Legal fees				
Postage				
Computer services				
Assessments by regulatory authorities				
Miscellaneous				
2. Total Estimated Expenses				
Estimated Net Profit Or (Loss) [Line 1 less Line 2]				

ESTIMATED INCOME AND EXPENSES FOR THE PROPOSED FACILITY (Continued)

DESCRIPTION	1 ST YEAR	2 ND YEAR	3 RD YEAR	4 TH YEAR
OCCUPANCY EXPENSES:				
Rent				
Depreciation				
Utilities (gas, electricity, and power)				
Maintenance (including janitor's salary)				
Insurance				
Real estate taxes				
Other occupancy expenses				
If leased - (a) leasehold improvements				
- (b) furniture and equipment				
TOTAL OCCUPANCY EXPENSES				
Less: Rental income anticipated				
Net Occupancy Expense (Should agree with the amount shown on page 6)				

Additional Comments from Applicant:

Enclose a check in the amount of \$2,000 made payable to the "Oklahoma State Banking Department" and submit this application to: Oklahoma State Banking Department, 2900 N. Lincoln Blvd., Oklahoma City, Oklahoma 73105.

It is hereby certified that all representations and information in this application and any other document submitted in connection with this application contain no misrepresentations or omissions of material facts.

Printed Name

Signature

Title (must be president, CEO, or other authorized officer)