## Application to Establish/Relocate a Branch Office

Date:

Name of credit union:

Principal Office Address:

- 1. Proposed effective date of branch office:
- 2. Proposed office address:
- 3. Distance from principal office:
- 4. Address of current branch to be relocated<sup>1</sup>, if applicable:
- 5. Member Information
  - a. Current number of members:
  - b. Potential members:
  - c. Estimated number of members that will use branch facility
- 6. Current level of fixed assets as a percentage of total assets:
- 7. Estimated level of fixed assets after branch acquisition:
- 8. Anticipated revenue projections:
- 9. Total estimated site and structure costs:
- 10. Estimated total monthly operating costs, such as telephone, utilities, supplies; depreciation of

building, furniture, fixtures and equipment

- 11. Estimated monthly increase in salaries to operate the office:
- 12. Number of staff required to operate branch facility
  - a. Current employee transfers
  - b. New hire(s)
- 13. Describe security measures(Attach additional response as needed):

<sup>&</sup>lt;sup>1</sup> Complete a Branch Closing Application if relocating an office. Revised November 19, 2018

- 14. Planned hours of operation:
- 15. Services to be offered(Attach additional response as needed):
- 16. Statement of contributing factors considered by management to be in support of the establishment of

the proposed branch office (Attach additional response as needed):

## 17. Form completed by:

18. Certification:

We hereby certify and declare that the information included in this application and all attachments to be true and correct to the best of our knowledge and belief. We agree to comply with the provisions of all laws and rules promulgated by the Credit Union Division applicable to branch offices. Signed for the Board of Directors: \_\_\_\_\_\_

Chairperson/Vice Chairperson

Date

Signature of Superintendent, Division of Credit Unions

Date