

## **Fiduciary Powers—After the Fact Notice**

### **General Information and Instructions**

#### **Preparation and Use**

This notice is used to effect a transaction under 12 CFR 5.26(e)(6), notifying you that we began engaging in trust activities in the state of *[insert name of state]* on *[insert date]*.

An “After the Fact Notice” (notice) must be completed by all national banks and federal savings associations seeking authorization to engage in fiduciary activities in another state. The notice is required whether the fiduciary activities will be offered directly through the national bank or savings association, through an operating subsidiary, or through a service corporation.

All questions must be answered with complete and accurate information that is subject to verification. If the answer is “none,” “not applicable,” or “unknown,” so state. Answers of “unknown” should be explained.

The questions in the notice are not intended to limit the applicant’s presentation nor are the questions intended to duplicate information supplied on another form or in an exhibit. For such information, a cross-reference to the information is acceptable. Any cross-reference must be made to a specific cite or location in the documents, so the information can be found easily. Supporting information for all relevant factors, setting forth the basis for the applicant’s conclusions, should accompany the notice. The regulatory agency may request additional information.

This notice form collects information that the Office of the Comptroller of the Currency (OCC) will need to evaluate an after the fact notice of fiduciary powers. The OCC must consider the applicable regulatory requirements set forth above when reviewing this notice. For additional information regarding these regulatory requirements, as well as processing procedures and guidelines and any supplemental information that may be required, refer to the OCC’s procedural guidelines in the *Comptroller’s Licensing Manual*. The applicant may contact the OCC directly for specific instruction or visit the OCC’s Web site at [www.occ.gov](http://www.occ.gov).

#### **Submission**

In addition to an original notice and the appropriate number of signed copies, submit an electronic copy of the information in the notice, especially of the business plan’s financial projections, if applicable. For e-mail submissions, contact the OCC for instructions and information about secure transmission of confidential material.

#### **Confidentiality**

Any applicant desiring confidential treatment of specific portions of the notice must submit a request in writing with the notice. The request must discuss the justification for the requested

treatment. The applicant's reasons for requesting confidentiality should specifically demonstrate the harm (for example, loss of competitive position, invasion of privacy) that would result from public release of information (5 USC 552 or relevant state law). Information for which confidential treatment is requested should be (1) specifically identified in the public portion of the application (by reference to the confidential section); (2) separately bound; and (3) labeled "Confidential." The applicant should follow the same procedure when requesting confidential treatment for the subsequent filing of supplemental information to the application. Contact the OCC for any further questions regarding requests for confidential treatment.

## Fiduciary Powers—After the Fact Notice

### Applicant

Name			Charter no.
Current street address			
City	County	State	Zip code

### Parent Company Identifying Information (if applicable)

Name			
Street			
City		State	Zip code

### Contact Person

Name			Title
Employer			
Street			
City		State	Zip code
Telephone no.		Fax no.	E-mail address

### Overview

Please list addresses where the bank will operate offices that provide core fiduciary functions, such as entering into binding commitments, making discretionary decisions, and giving advice (per 12 CFR 9.2(e) and 150.30).

If we have been previously approved for limited fiduciary activities, and the activities in the new state(s) differ from those previously approved, we shall submit an application for these fiduciary activities in the state.

Before this action, we (1) reviewed and analyzed state laws and any limitations and (2) completed all the appropriate steps to offer trust services in this state (discuss any contact with state banking authorities about the trust operation).

**OCC CERTIFICATION**

**I certify that the bank’s board of directors, shareholders, or a designated official has authorized the filing of this notice.** I certify that the information contained in this notice has been examined carefully and is true, correct, complete and current as of the date of this submission.

I acknowledge that any misrepresentation or omission of a material fact with respect to this notice, any attachments to it, and any other documents or information provided in connection with this notice may be grounds for the OCC to require cessation of the proposed activity, and may subject the undersigned to legal sanctions, including the criminal sanctions provided for in Title 18 of the United States Code.

I acknowledge that the activities and communications by OCC employees in connection with the filing do not constitute a contract, express or implied, or any other obligation binding upon the OCC, the United States, any agency or entity of the United States, or any officer or employee of the United States, and do not affect the ability of the OCC to exercise its supervisory, regulatory and examination authorities under applicable law and regulations. I further acknowledge that the foregoing may not be waived or modified by any employee or agent of the OCC or the United States.

\_\_\_\_\_  
President or other authorized officer

\_\_\_\_\_  
Typed name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Employer

***(Bank seal) (Applicable to national banks only)***