Notice of Change in Activities or Operations

Type of Notice (*Check the appropriate box*)

This is to notify the OCC of the following change affecting the identified federal branch or agency:

Corporate Title

Mailing Address of: ____ Foreign bank ____ Federal branch or agency Home State Designation

Conversion to State-licensed Operation

Complete the information as applicable to the particular change checked.

Foreign Bank Identifying Information

For Changes in Corporate Title

Foreign Bank Previous Name

(exact corporate title of bank)

Foreign Bank New Name

(exact corporate title of bank following title change)

Effective Date _____

For Changes in the Mailing Address of the Foreign Bank

Previous Address (Headquarters office of foreign bank)_____

City_____ State _____ Country _____

New Address (Headquarters office of foreign bank)

City_____ State _____ Country _____

Effective Date _____

Federal Branch or Agency Identifying Information

License No.	

Name _____

(exact corporate title of United States office)

For Changes in the Mailing Address of the Federal Branch or Agency

Current Mailing Add	dress			
City Code	County	State	ZIP	
New Mailing Addres	SS			
City Code	County	State	ZIP	
Effective Date				
For Changes in Home State Designation				
Current Home State				
New Home State				
Effective Date _				

A copy of the notice or application to the Federal Reserve Board (FRB) or determination of the FRB for a change in home state designation should be attached.

For Conversion to a State License

Reasons for converting:

Planned Effective Date _____

A certified copy of the resolution adopted by senior management of the foreign bank and a copy of the state application should be attached. Upon approval to convert, we certify that the license certificate, trust permit (if applicable), and reports of examination and any related correspondence will be returned to the OCC (or in the case of the reports of examination and related correspondence, these have been destroyed). We understand that the CED will not be released until all OCC official documents are returned or destroyed.

Executed this _____ day of _____ , _____.

Signature of Authorized Officer

Typed Name

Title