



# Office of the State Bank Commissioner

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**APPLICATION TO ESTABLISH  
A BANK SERVICE COMPANY  
Pursuant to K.S.A. 9-1123 through 9-1127**

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(Name of Bank)

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(Current Street Address and Mailing Address of Main Office)

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(City, County, State, Zip Code)

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(Name, Telephone Number and E-Mail Address of Person to Contact Regarding Application)

An original application should be submitted to:

Office of the State Bank Commissioner  
700 SW Jackson Street, Suite 300  
Topeka, Kansas 66603-3796

The application is available to members of the public, subject to limitations imposed by federal or state statutes. If the applicant is of the opinion that disclosure of commercial or financial information would likely result in substantial harm to the competitive position of the bank, or that disclosure of information of a personal nature would result in a clearly unwarranted invasion of personal privacy, confidential treatment of such information may be requested. 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."

Please submit the following information with regard to the proposed bank service company. Separate pages should be attached, where necessary. The State Bank Commissioner may request more information, if deemed necessary.

1. A complete description of the proposed service company including the name, location, nature of business and specific activities to be conducted, and how the proposed services will benefit the public.
2. The amount of the bank's investment in the service company. Pursuant to K.S.A. 9-1124, a bank's investment in a service company cannot exceed 10% of the paid-in and unimpaired capital and unimpaired surplus, and 5% of total assets.

If the service company is owned by more than one state or national banks, please identify those banks.

3. The type and location of any other applicant owned service companies.
4. If the service company will be "free standing", provide a physical description of the proposed office and include a statement as to whether the proposed premises and fixed asset costs will comply with applicable statutory limits. If additional costs of the proposed new office, when added to current fixed assets, equal more than 50% of the bank's capital accounts as defined, a letter requesting permission to exceed the 50% limit must be submitted to the State Bank Commissioner. The letter should also explain how compliance with K.S.A. 9-1102(e) will be achieved.

If the service company will be "free standing", a letter from the Historic Preservation Department of the Kansas State Historical Society indicating if the proposed new office will be in a location that is included, or eligible for inclusion, in the National Register for Historical Places.

5. Management and staffing plans for the proposed service company, including individuals' qualifications and experience.
6. How the proposed service company will be useful and the chances for success, including the impact the service company will have on the overall condition of the bank.
7. Insurance and/or bonding coverage which will be obtained in conjunction with the proposed service company.
8. A copy of the proposed Articles of Incorporation for the proposed service company.
9. A copy of the application made to the bank's primary Federal regulator, if applicable.
10. Provide any additional information or comments, not requested in the above items, if it is deemed pertinent to support the need for the proposed service company.

Questions should be directed to:  
Taylor Stos, Applications and Statistics Manager  
Office of the State Bank Commissioner  
700 SW Jackson Street, Suite 300  
Topeka, Kansas 66603-3714  
(785) 296-4856 FAX(785) 296-6037

In support of this application, applicant has hereby made the aforementioned statements and representations, and submits this information, based upon the factors as outlined for the purpose of inducing the State Bank Commissioner of the State of Kansas to approve the application for the previously listed Kansas bank.

Applicant hereby authorizes the State Bank Commissioner of the State of Kansas to conduct any investigation, examination or review of the condition of the applicant bank and to provide any other material as requested by the State Bank Commissioner.

ATTESTATION

Applicant affirms that the information contained in this application has been prepared at the direction of the Board of Directors and that it is accurate and complete to the Applicant's best knowledge and belief.

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

By \_\_\_\_\_  
(Authorized Officer)

Title

\_\_\_\_\_

ATTEST:

\_\_\_\_\_  
(Corporate Secretary)