

STATE OF MONTANA • DEPARTMENT OF ADMINISTRATION DIVISION OF BANKING AND FINANCIAL INSTITUTIONS 301 South Park, Suite 316 • PO Box 200546 • Helena, MT 59620-0546 Phone: 406-841-2920 • Fax: 406-841-2930 Website: www.banking.mt.gov • E-Mail: banking@mt.gov

# APPLICATION FOR A CERTIFICATE OF APPROVAL TO ORGANIZE A NEW MONTANA CREDIT UNION

Date:

Pursuant to Chapter 3 of Title 32, MCA, we the undersigned, proposed incorporators, request a Certificate of Approval to proceed with the incorporation and organization of a new Montana credit union. Said credit union proposes to conduct business at

Street Address	City	State	ZIP

We submit the following for your information in support of this application.

### **Organizers/Subscribers**

Attached as Exhibit 1 are names, addresses and principal occupations of the organizers/subscribers of the proposed new credit union.

### **Executive Officers of the Board & Senior Management**

Attached as Exhibit 2 are names, positions, qualifications and references of the executive officers of the board and senior management of the new credit union, if known.

### **Public Necessity and Demand**

Attached as Exhibit 3 is a summary of the evidence applicant intends to present to demonstrate a persuasive showing of reasonable public necessity and demand for a new credit union at the proposed location.

### Par Value Per Share

### Estimated Operating Statement & Deposit Volume of Proposed Credit Union

<b>Current Operating Earnings</b>	<u>First Year</u>	Second Year	Third Year
Interest & Discount on loans			
Interest on Securities			
Commissions, Fees & Service Charges			

	<u>First Year</u>	Second Year	<u>Third Year</u>
Other Current Operating Earnings			
TOTAL EARNINGS			
<b>Current Operating Expenses</b>			
Salaries & Wages			
Interest on Time Deposits			
Interest on Borrowings			
Other Current Operating Expenses			
TOTAL EXPENSES			
Net Operating Earnings (losses)			
Estimated Share Volume at End of Year			

**Estimated Investment In:** (Attach schedules as Exhibit 4 to detail the basis for each of the estimates shown for the four classes of fixed assets.)

Credit Union Premises	
Fixtures	
Furniture	
Equipment	

### **Additional Exhibits**

The following additional exhibits must be attached:

- Exhibit 5: A copy of the application submitted for NCUSIF insurance.
- Exhibit 6: Proposed Articles of Incorporation & By-Laws.
- Exhibit 7: Legal description and street address of proposed site for credit union building.
- Exhibit 8: If building or land is to be leased, a copy of proposed lease agreement.
- Exhibit 9: List of equipment, furniture, etc. to be leased, with annual cost of each lease agreement.
- Exhibit 10: List of employee positions on payroll at credit union opening with salary estimate for each position.

# Please Refer to Attached List of Supplemental Questions.

# TO BE COMPLETED BY INCORPORATORS OF CREDIT UNION:

By:	Typed Name:
By:	Typed Name:
	r Montana, personally appeared the proposed incorporators of n, who severally acknowledged that they executed the
	day of
AFFIX SEAL HERE	Signature of Notarial Officer         Name - typed, stamped, or printed         Title and Rank         Residing at         My commission expires:

# **SUPPLEMENTAL QUESTIONS**

1.	What is the	proposed	field of	f membershi	p?
		proposen			r •

2.	Has an organizational meeting been held?	Yes	🗌 No
	Number in attendance:		

3. Estimated potential membership: \_\_\_\_\_

- 4. Who will assume credit union record keeping duties if it is chartered?
- 5. Who will submit application for a surety bond?
- 6. Name of the person who will maintain contact with the credit union after it is organized to assist in operations:
- 7. Are the subscribers within the field of membership and are they representative of the entire group?
  Yes No If not, please explain:

- Estimated number of hours per day or week the credit union facilities will be available to members.
   Will regular business hours be maintained?
- 9. If the members to be served are dispersed over a wide area or working in more than one location/city, give the following information:

Number of persons at each location:

How is it proposed that business be transacted with outlying groups?

10.	Are credit union services currently available to members of this group?	🗌 No
	If so, explain the nature and extent of the overlapping of such service.	

11. Proposed date to begin business if charter is approved:

12. Other comments or information that will assist in the consideration of this application (add additional pages as necessary).

# **INSTRUCTIONS**

Schedules or inserts may be attached to this application whenever the space provided is insufficient. Attached schedules or inserts are a part of this application and should be on paper the same size as this page. Applications need not be bound.

You may provide any information in addition to that requested in this application which, in your opinion, might aid in the disposition of your proposal.

It is the responsibility of the applicant to identify the information submitted with the proposal which it deems confidential clearly and on separate pages. However, the determination of the question of confidentiality and the discretion to release information submitted to it which is exempt resides with the Division of Banking and Financial Institutions, and the specific information you indicate to be confidential may be made available for public review after consideration.