

## TRANSFER/REINSTATEMENT APPLICATION

LexisNexis Risk Solutions is the official Registrar for the American Bankers Association.



1. APPLICANT INSTITUTION (must be the physical	al address of	f the head of	fice of the	institution i	requesting	the routir	ng number)	
Full legal title:								
Charter address:	ess:					Phone:		
County:	City:			State	:	Zip: -		
Holding company title/city/state:					•			
2. ADDRESS OF THE BRANCH/OFFICE USING TH	HE ROUTIN	G NUMBER	(if differer	nt from abo	ve)			
Address:								
County:	City:			State	:	Zip: -		
3. CONTACT INFORMATION								
Name:	Title			Title:	Title:			
Address:								
City:	S	tate: Zip: -				Phone:		
Email:			Fax:					
4. JUSTIFICATION				LexisNex	is Risk Sol	utions us	se only.	
Type of request: Transfer [ ]								
Reinstatement [ ]								
Routing Number in question:								
Type of transaction (for transfers only): Purcha	ase of bran	ches [ ]	New	office [	] Fa	iled insti	itution [ ]	
Other (please specify):								
Head office legal title (*other institution involved	I):							
Address: City:			S			e:	Zip: -	
Contact name:						Phone:		
Transaction approval (by chartering agency) Preliminary received on:					Fi	Final received on:		
A				COPY OF THE LETTER GIVING PRELIMINARY OR FINAL APPROVAL FROM THE ZATION OR AGENCY				
5. REGULATOR / EXAMINER (please check all t	hat apply)							
FDIC [ ] NCUA [ ] State Banking	g Authority	·[ ] O	CC [ ]	Feder	al Reserv	e Bank [	1	
6. ELIGIBILITY REQUIREMENTS								
Is your institution eligible to maintain an accou (Per section II.A. of the RNAB routing number policy an institution must be eligible to maintain an accou	y, to qualify	for a routing	number		Yes [	]	No [ ]	
FED contact name:					Phone:			

## **AGREEMENT**

The applicant understands that its authority to provide financial or payment services is governed by the charter granted by your chartering agency. The assignment of a routing number to the applicant institution does not expand the powers of that institution as specified in its charter, articles of association or rules and regulations of the chartering agency.

## Additionally:

- 1) The applicant affirms that it is a state or federally chartered institution, eligible to maintain an account at a Federal Reserve Bank.
- 2) The applicant agrees to abide by the Routing Number policy of the Routing Number Administrative Board of the ABA.
- 3) The applicant agrees that the assignment or use of an assigned routing number conveys no rights of ownership to the number.
- 4) The applicant agrees that an assigned routing number cannot be transferred to another institution without the permission of the Routing Number Administrative Board.
- 5) The applicant agrees to give up the Routing Number: should it relinquish its charter or if for any reason the continued retention of the Routing Number no longer meets the eligibility criteria established in the Routing Number Policy of the Routing Number Administrative Board.
- 6) A nominal **licensing** fee will be charged annually for each assigned number. The fee, which is currently \$98, provides for the administration expenses required to maintain each number in the Routing Number system, and may be adjusted as expenses warrant.

7. BILLING INFORMATION: A valid email address (preferably from Accounts Payable) is required for billing purposes.							
Name:	Title:						
ddress:		City/State/Zip:					
Email:	Accounts P	ayable Email:					
8. SIGNATURE: This application must be signed by an officer of the applicant institution.							
Signed:	Name (p	Name (please print):					
	Title:						
	Date:						
9. MAILING INFORMATION: Please send completed application, appropriate documentation and payment to cover research and processing to:							
<b>LexisNexis Risk Solutions</b> ● 1007 Church Street, Floor 6, Evanston, IL 60201 Attn: Routing Number Registrar							
<ul> <li>Fax: 847.933.8040</li> <li>E-mail: registrar@lexisnexisrisk.com</li> </ul>							

10. FEE: The application fee is \$550 if applying for the institution's first routing number, or \$700 if applying for any additional routing number

Please do not include any form of payment with this application, once a routing number is assigned, LNRS will email the invoice to the billing contact provided above.

The application takes approximately two weeks to process upon receipt of complete application. Incomplete information may delay processing. We will send you an official confirmation on the transfer/reinstatement of the number and notify the Federal Reserve in your district of the transfer/reinstatement. For information on applying for a routing number, Traveler's Check routing number or Electronic Transaction Identifier, please contact the Routing Number Registrar at the address above.

Please do not send this form through a secure portal, we are unable to log into your server.