## Expedited Branch Relocation Application and Certification Form

Form 1	15 REL	O EX	

Name of Applicant			
Address of Applicant (Principal office)			
(Street, City, Zip, County)			
Filing officer			
(Name, Title, Phone Number)			

(Name, Tiue, Phone Number)	ong Must Bo Angwong
	ons Must Be Answered
Are you Requesting Expedited Processing?	
(If no, complete form 115 Relo)	
Current Location of Branch	
(Street, City, Zip, County)	
(Street, City, Zip, County)	
Proposed Location of Branch	
(Street, City, Zip, County)	
When did applicant commence business?	
(Must be more than 3 years old)	
Most recent examination rating (CAMELS-	
Agency State-FDIC-OTS-FRB) Date	
Composite Rating (Must be 1 or 2)	
Management Rating (Must be at least 2)	
Most recent CRA rating (if applicable) /date	
(Must be satisfactory or better)	
Capital: Leverage Ratio/date	%
(Must be 5.0% or greater)	/•
Capital: Tier 1 Risk Based Ratio/date	%
(Must be 6.0% or greater)	
Capital: Total Risk-Based Ratio/date	%
(Must be 10% or greater)	
Board Resolution Submitted/Dated	
Describe the availability of the proposed office	
to its prospective customers.	
(Attach separate sheet if necessary)	
Will the area served by the new location	
be substantially different from the area	
served by the previous office?	
(If yes, explain how.)	
Do any of the applicant's executive officers or	
directors have a direct or indirect interest in the	
premise? (NJAC 3:1-10.1. If yes, attach form 114.	
Cost of proposed branch	Land:
	Building:
	Furniture & Equipment:
Do the contemplated expenditures plus the	
present book value of your bank's premises	
investment fall within the statutory limitations	
(less than 50% of capital)? (See N.J.S.A. 17:9A-	
24(13) or N.J.S.A. 17:12B-166. If no, explain how over investment would be cured.)	
I hereby certified that the above is true and correct.	1
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DATE :	(Signature of Filing Officer)
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