Notice of Switch Operation

NDBF Use Only: Date Received: _____ By: ____

Nebraska Department of Banking and Finance

http://www.ndbf.ne.gov (402) 471-2171 1526 K Street, Suite 300 PO Box 95006 Lincoln, NE 68509-5006 michael.mcdannel@nebraska.gov

Form Adopted: 8-2016

Type of Notice:

Check all that apply:		
Switch had notice on file with Department prior to September 1, 2016.		
Intends to continue Nebraska operation on and after September 1, 2016.*		
Intends to cease Nebraska operation prior t	o September 1, 2016.	Cessation Date:
Switch intends to begin operation in Nebraska on or after September 1, 2016.**		Operational Date:
Switch intends to cease operation on or after September 1, 2016.		Cessation Date:
Notice Details:		
Switch Name:		
Trade Name/DBA:		
Corporate Office Physical Address:		
Street:		
City:	State:	Zip:
Mailing Address, if Different than Physical Address:		
City:	State:	Zip:
Website:		
Officer Authorized to Answer Inquiries Related to Switch Operation in Nebraska:		
Name:		
Title:		
Telephone:		
Email Address:		
Mailing Address, if Different than Switch Mailing Address:		
City:	State:	Zip:
*Notice is effective until August 31, 2017. **Minimum 3	0-day prior notice required.	
ATTESTATION: The information set forth herein is true and correct to the best of my knowledge and belief.		
Signature of Corporate Officer:		Date:
Printed Name and Title:		