

Nebraska Department of Banking and Finance

Request for Proclamation to Authorize Office Closure

Name of Financial Institution: _____

Entity Authorization:

By (Signature): _____

Printed Name: _____

Title: _____

Date: _____

Address of closed location(s):

<u>Street</u>	<u>City</u>

Pursuant to Nebraska statutes, the Department Director has the power to authorize any financial institution to close any or all of its offices as a result of an emergency. If an institution decides to close any or all of its offices for an emergency, the statute provides that it must notify the Department (Neb. Rev. Stat. § 8-1,126). Additionally, if the closure lasts longer than 48 hours, the Director must approve.

Submit this form to the Nebraska Department of Banking and Finance via email to your Review Examiner. Put your entity's name and the words "Proclamation to Authorize Office Closure" in the subject line. A response will be given from the Department as soon as possible.

Date Received: _____ NDBF Approval: _____ Date: _____