



Applicant Information: Commercial Banks, Savings Institutions, and Industrial Loan Companies

Institution Information

Institution Name (As it appears on your institution's charter)		Website Address	
Home Office Street Address		City	
County	State	Zip	Zip Extension
Mailing Address (May be Corporate Office or Post Office Box)			
City		State	Zip
			Zip Extension

Contact Information

Primary Contact		Title
Telephone Number	Fax Number	Email Address
Managing Officer (CEO)		Title
Telephone Number	Fax Number	Email Address
CFO		Title
Telephone Number	Fax Number	Email Address

General Information

FDIC Certificate No.	Deposit Insurance Type (BIF, SAIF, Other)	Deposit Insurance Effective Date	Taxpayer I.D.	
State of Incorporation	Incorporation Date (mm/dd/yy)	Charter <input type="checkbox"/> State <input type="checkbox"/> Federal	Charter Date (mm/dd/yy)	
Institution type <input type="checkbox"/> Commercial Bank <input type="checkbox"/> Thrift & Loan		Federal Reserve System Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Commenced Operations	Fiscal Year End
Holding Company Name (If Applicable)		Total Holding Co. Assets (\$ in 000's)	Holding Co. Assets As of Date	
Federal Regulator/Examiner	State or Other Regulator/Examiner		Last Examination Date (mm/dd/yy)	
Regulator Who Conducted Last Examination				

Are there any creditors or other entities that possess a security interest or lien on assets of your institution that may be pledged to the Bank? (Please review relevant agreements before answering.) ☐ Yes ☐ No

If Yes, please describe the type of lien (blanket or specific), the assets encumbered, and the name of the creditor that was granted a security interest.

Has your institution been a member of any FHLBank within the past five years? ☐ Yes ☐ No

If Yes, please indicate the FHLBank(s) and date(s) and reason for membership termination.

Has your institution been involved in any merger transaction within the past six months? ☐ Yes ☐ No

If Yes, please describe the nature of the transaction, including the name of the institution(s) involved, the original state(s) of incorporation, and the date of the merger.

Has your institution had any name change within the past six months? ☐ Yes ☐ No

If Yes, please identify the previous name(s), and the date of the name change(s).

Note to applicant: Upon the Applicant's approval for membership, the Bank will file a UCC-1 Financing Statement that covers assets pledged to the Bank as collateral. Please note that before assigning borrowing capacity on collateral, the Bank requires a first priority lien position on pledged collateral.

Capital: [as of _____ (date)] (\$ in 000's)

	Actual		Required	
Leverage Capital	\$	%	\$	%
Risk-Based Capital	\$	%	\$	%
Additional Capital Requirements (if any)	\$	%	\$	%

Adjusted Net Income: Last six quarters of net income excluding extraordinary items (starting from most recent quarter)

(\$ in 000's)		As of Quarter Ending		(\$ in 000's)		As of Quarter Ending	
1.	\$			4.	\$		
2.	\$			5.	\$		
3.	\$			6.	\$		

Asset Quality: Classified assets [as of quarter ending _____ (date)] (\$ in 000's)

Substandard	Doubtful	Loss
\$	\$	\$

Most recent Community Reinvestment Act (CRA) rating:

Date of most recent CRA evaluation:

Maximum term offered on home mortgage loans: _____ years amortized over _____ years.
(Home mortgage loans may include first lien residential mortgage loans, home equity loans, and mortgage-backed securities.)

Community Financial Institution Qualification: (Complete if Applicable)

A Community Financial Institution (CFI) is an FDIC-insured depository with average total assets for the preceding three-year periods of less than \$1,123,000,000 (as of January 1, 2015; subject to annual adjustment). A CFI is not required to have at least 10% of its total assets in residential mortgage loans and may pledge additional types of collateral. If applicable, please provide your institution's total assets as listed on your institution's regulatory financial reports as of the three most recent yearends. If your institution's total assets have never exceeded \$1,123,000,000, it is considered a CFI.

As of Year Ending	(\$ in 000's)
1.	\$
2.	\$
3.	\$
Average Total Assets for Preceding Three-year Periods	\$

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Docket Number	Date of FHLBSF Approval	Relationship Manager
Credit Analyst		Collateral Asset Manager