

TEMPLATE: Regional Summary of Fixed Asset Waiver Request

REGIONAL SUMMARY Fixed Asset Waiver	
Charter Number	
Credit Union Name	
Supervisor Name	
Examiner Name	
CAMEL Rating / Effective Date	
Financial Data Date	
Total Assets	
Total Shares and Retained Earnings	
Net Worth Ratio	
Current Fixed Assets Ratio	
Proposed Fixed Assets Ratio	

General FOM Description:

Reason for Request:

At a minimum, examiner should consider the following when evaluating a request:

- Current financial statements including balance sheet and income statement
- Most recent FPR and examination report
- Reasonableness of the current strategic plan
- Necessity and purpose of the purchase
- Proposed dollar amount of expenditures and resulting ratio of total fixed assets to shares and retained earnings
- Alternatives considered by the credit union
- Date of the proposed acquisition
- The financing of the acquisition (i.e., investments or cash)
- Direct and indirect costs associated with the new acquisition as it relates to net income (i.e., increased maintenance, taxes and utilities, opportunity cost of lost investment income)
- Whether any fixed assets will be disposed of or any present expenses eliminated as a part of the proposed investment
- Impact the acquisition will have on liquidity, income, and net worth over the next three to five years
- Adequacy of ALM policies and procedures

- FOM
- Appropriateness of the size, location, and value of the purchase
- Accessibility of building (if this is the reason for the waiver) to members
- Any negative local economic factors
- Assessment of management
- Whether a contingency amount, in addition to the acquisition request, should be approved

Balance sheet and income statement projections and assumptions

(Are the pro forma financial statements reasonable? Consider direct and indirect costs associated with the new acquisition as it relates to net income (i.e., increased maintenance, taxes and utilities, opportunity cost of lost investment income). Consider whether any fixed assets will be disposed of or any present expenses eliminated as part of the proposed investment. *Consider the impact the acquisition will have on liquidity, income and net worth.*)

Other pertinent information

(Consider the appropriateness of the acquisition (i.e., size, location, value). Discuss any negative trends or concerns noted at previous examinations.)

EXAMINERS AND SUPERVISOR RECOMMENDATIONS AND COMMENTS:

(Discuss whether a contingency amount, in addition to the acquisition request should be approved (i.e., 1% of requested acquisition amount). Discuss an appropriate limit of future purchases (aggregate per year) (i.e., the dollar amount of annual depreciation).)

Examiner's Recommendation:

SE/DSA Concurrence:

APPROVAL/DENIAL RECOMMENDATIONS
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Analyst Comments:

APPROVE ☐

DISAPPROVE ☐

Supervision Analyst _____ Date_____

APPROVE ☐

DISAPPROVE ☐

Director of Supervision _____ Date_____

APPROVE ☐

DISAPPROVE ☐

Associate Regional Director _____ Date_____

APPROVE ☐

DISAPPROVE ☐

Regional Director _____ Date_____