**Bristol County Savings Bank Internal Report Request Form**

Instructions: All report requests must be submitted on an Internal Report Request Form. Please complete all of the fields, providing specific detail in the “Report Detail” section. Email this form, and any report samples or screen shots, to [**Report.Request@bcsbmail.com**](mailto:Report.Request@bcsbmail.com)

Submitted date: 8/21/2025 Requestor name: Terry Janeiro

Type of request:  New  Modify existing (report name): Click to enter text.

Business area: Compliance

Purpose: Informational Project Name: FDIC Indirect Remediation

Proposed start date: 1/1/2020 Proposed due date: 8/27/2025

Output format:  PDF  Excel  iDashboard

|  |  |  |
| --- | --- | --- |
| Most recent business day | Most recent end-of-month | Specific Date: Click to enter a date. |
| Date Range: From: 1/1/2020 To: 12/31/2024 | | |

Report data as of:

Will this be a recurring report? No

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Daily | Weekly | Monthly | Quarterly | Yearly |
| Other: Click to enter text. | | | | |

If yes, frequency:

***Report Detail:***

|  |  |
| --- | --- |
| **Specific business need:**  Describe the business situation to be addressed by the report. | The Bank must remediate pricing disparities for Indirect loans due to dealer markups for the years 2020, 2021, 2022, 2023, & 2024. |
| **Request goal:**  How will the business benefit from the report? | It will allow the Bank to identify which Indirect loans have already paid off versus those that are still active. |
| **Required fields:**  Provide the required fields names or description. | Please segregate each year’s data to a separate tab on the Excel workbook and include the following: Application ID, Account Number, Loan Origination Date, Applicant Last Name, Applicant First Name, Co-Applicant Last Name, Co-Applicant First Name, Applicant Credit Score, Co-Applicant Credit Score, Model Year, Vehicle Mileage, Dealer Name, Amount Financed, Current Balance, Contract Rate, Buy Rate, Loan Paid or Open, and Date Closed when applicable. |
| **Field sort:**  Describe how the information should be sorted (account number, name, branch, etc.). | Click to enter text. |
| **Account Status:**  Check off account status(es) to include. | Active  Dormant  Non-Performing (non-accrual)  Closed  Charged-off |

To be completed by Report Writer

|  |  |  |
| --- | --- | --- |
| Job # | Date Submitted: | Date Assigned: |
| Created by: | | |
| Data Source(s) Used (COCC table name, etc): | | |
| Criteria/Filter: | | |
| Validation: | | |
| Output scheduled/saved (include schedule detail): | | |
| Draft submitted date: | Final delivery date: | |
| Final approval by: | | |