FEDERAL RESERVE (FINANCIAL SERVICES



Custodial Inventory Application Form and Agreement

Section 1: Service Description and Form Instructions

Completion of this form, and receipt of written notice of approval from the Federal Reserve Bank, is required before an Institution may participate in the custodial inventory (CI) program described in Appendix 1 of Federal Reserve Bank Operating Circular 2, Cash Services. The Federal Reserve Bank uses the information provided on this form, and the results of its subsequent review of the institution, to determine the Institution's eligibility for the CI program.

By signing this form, the Institution named below (i) requests to participate in the CI program and (ii) agrees to the terms and conditions of Operating Circular 2, Cash Services and the appendices thereto (including but not limited to Appendix 1 and the Custodial Inventory Manual of Procedures referenced therein), as the same may be amended from time to time. Subject to the Reserve Bank's approval, the Institution may commence participation in the CI program when: (i) the Reserve Bank notifies the Institution of successful completion of the evaluation process and the effective date of service; and (ii) the Institution completes the set-up process, including obtaining authorized user credentials for the Federal Reserve's FedCash® inventory tracking system.

In accordance with Appendix 1 of Federal Reserve Bank Operating Circular 2, Cash Services, an Institution may subcontract a CI to a Subcontractor. Such Subcontractor must use the FedCash internet-based accounting and inventory tracking system, via the FedLine Web® access solution, to manage the Cl. To access FedLine Web, the Subcontractor must have an up to date non - depository institution Official Authorization List (OAL) on file with the Customer Contact Center (CCC) and a Customer Identification Number (CIN).

By signing this form, the Institution named below further agrees that, in circumstances where the Institution subcontracts a CI to a Subcontractor, such Subcontractor is authorized on behalf of the Institution to transact business with the Federal Reserve Banks using FedLine Web-based services and business applications, including but not limited to designating End User Authorization Contacts and Subscribers. The Institution represents and warrants that it has entered into an agreement with such Subcontractor requiring it to comply with all applicable provisions specified in Operating Circular No. 5 and the Password Practice Statement; and to comply with all applicable Federal Reserve Bank security procedures, as each of the above is amended from time to time.

ALL QUESTIONS/FIELDS ARE MANDATORY AND REQUIRE COMPLETION

For assistance completing this form, please consult your local FedCash Services contact.

Send completed forms to Customer Contact Center at the email address or fax number below.

Federal Reserve Bank **Customer Contact Center** ccc.bankservices@kc.frb.org

Fax: (877) 281-3647

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Section 2: Custodial Invento	ry (CI) Site Info	rmatio	n			
Institution Name						
Identification Number (ABA/RTN)	9-Digit ABA Number				4-Digit Branch Number	
Street Address of the CI Site						
City of CI Site						
State of CI Site						
Zip Code of CI Site						
Fax Number						
Primary Contact						
Primary Contact Name	First		Middle Initial	ŀ	Last	
Title						
	Phone			Exten	sion	
Telephone						
Email Address						
Alternate Contact						
Name	First		Middle Initial		Last	
Title				L		
Telephone	Phone			Exten	sion	
Email Address						
Address for Notices						
f different from Primary Contact inform	ation					
Address 1						
Address 2						
City						
State						
Zip Code						
Attention:						

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No

No

		(Upon receipt by the Federal Reserve Banks
Fax		
Section 3: Customer Specific I	Requests	
General Information 1) For the site where CI inventory wo	ould be held, p	lease provide the following:
Insurance Carrier		
Liability Limit		
Deductible		
Insurance Type (blanket, bond, etc.)		
Please provide a description of the	e equipment tl	nat will be used to sort/process the CI currency:
Equipment Brand and Model No.		Is equipment located at a bank-owned site or Subcontractor-owned site?
Do you have two or more internet	connected PC	Cs at the identified site?

Yes

Yes

3) (a) Do you have two or more internet connected PCs at the identified site?

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Yes		No				
4) (a) If yes, please provide the fo	ollowing information	า:				
Subcontractor Name						
Subcontractor CIN (Customer Identification Number)						
Subcontractor Contact/Title	First	Middle Initial	Last			
Telephone Number	Phone		Extension			
Alternate Contact/Title	First	Middle Initial	Last			
Telephone Number	Phone	,	Extension			
Fax Number						
Length of Relationship (years/months)						
Current Contract Expiration Date						
Subcontractor Insurance Liability of Limits	&					
How frequently do you audit subcontractors?						
Does Subcontractor have Internet Access?						
Susiness Practice/CI Usage 5) Provide a description of how your providing fit currency to ATM, I	ou intend to use the					

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¹ Please note that the subcontractor may use FedLine Web-based services and business applications to act on behalf of other institutions that use the same subcontractor to access these services and applications.

Volume Verification

6)	As part of the eligibility requirements to participate in the Custodial Inventory program, your institution
	must demonstrate that each vault in which it seeks to operate a CI has the ability to recirculate a
	minimum of 200 bundles of \$10 and \$20 notes on a regular basis per week in a Federal Reserve Bank
	zone or sub-zone. This minimum requirement can be met in one of the following three ways:

By cross-shipping with the Federal Reserve Bank at least 200 bundles of \$10 and \$20 notes per week at the prospective CI Vault in the zone or sub-zone at the time of application.
By providing payment records for the prospective CI Vault demonstrating that it recirculates among its customers at least 200 bundles of \$10 and \$20 notes weekly in the zone or sub-zone.
By demonstrating a combination of cross-shipping activity and recirculation among its customers at the prospective CI Vault totaling at least 200 bundles of \$10 and \$20 notes in the zone or sub-zone.

Check on of the three boxes above to indicate that your Institution's vault meets one of the three criteria and that you agree to provide corroborating data on aggregate daily payments to customers of \$10s and \$20s for that vault. The payment data must be comprised of four consecutive weeks of activity, be provided in the prescribed format and be made available at the time of the CI Site Inspection. Daily payments are defined as all payments made by the site, excluding deposits to the Federal Reserve; daily payments include: payments to commercial customers and correspondent banks, as well as your institution's branches and ATM network.

Litigation History

are aware	e. If none, state	or enforcement ac "none." The infor consible departme	mation you provi	de should be ve	rified with your	Audit,

² The prescribed format will be provided by the Federal Reserve Bank at the time the Site Inspection is scheduled.

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CI Site Security Self-Evaluation

Any question with an "R" indicates it is a requirement in order to participate in the CI Program.

Building

	Questions	Program Requirement	Yes	No
8)	Is the building's construction separate from adjoining structures?	-		
9)	Is the building's roof inaccessible from other structures or overhead projections?	-		
10)	Does a perimeter fence protect the site?	-		
11)	Does exterior lighting allow nighttime viewing of all perimeter walls?	-		
12)	Are employee's personal belongings and packages monitored/inspected when leaving the building?	-		
13)	Is this site solely used for currency processing?	-		
14)	Are security systems supported by back-up power capabilities?	R		

Vault

	Questions	Program Requirement	Yes	No
15)	Does the site have a dedicated vault or similar area that can be secured from access by non-accountable personnel?	R		
16)	Is the size of the vault sufficient to allow space for the segregation of FRB currency from other items stored in the vault?	R		
17)	Is the vault separated from any outside walls?	-		
18)	Is the vault constructed to be a free standing structure within the building?	_		
19)	Does management ensure separation of duties between staff who have accountability for valuables and those that are responsible for record-keeping and balancing?	R		

Access Control

Questions	Program Requirement	Yes	No
20) Is there a separate alarm system for the vault?	R		
21) Are time locks employed?	R		
22) Does site have an active, monitored alarm system?	R		

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23)	Are all entrances to the site connected to the alarm system?	R	
24)	Has the alarm system been tested within the last year?	R	
25)	Is the alarm disconnect code restricted to a limited number of management individuals?	R	
26)	Is the disconnect code changed whenever a staff member who holds the code leaves the employ of the company?	R	
27)	Is access to the vault restricted to accountable individuals (i.e., those who hold valuables and management who has responsibility for the valuables?	R	
28)	Is the vault door combination maintained under dual control?	R	
29)	Are vault combinations changed on a periodic basis?	_	
30)	Is the vault combination changed when a person having the combination leaves the employ of the company?	R	
31)	Are there written procedures for opening and closing the vault?	_	
32)	Does management conduct periodic audits to confirm compliance with these procedures?	_	

Video Surveillance

viu	eo Surveillance	, , , , , , , , , , , , , , , , , , ,		Т
	Questions	Program Requirement	Yes	No
33)	Is there a closed-circuit television (CCTV) system installed at the site?	R		
34)	Will the CCTV cameras record access areas to the vault?	R		
35)	Will the CCTV cameras record activity in the FRB segregated area in the vault?	R		
36)	Will the CCTV cameras record on a twenty-four hour basis?	R		
37)	Does video surveillance equipment meet the standards for minimum resolution and continuous, smooth and uninterrupted recording outlined in the CI Manual of Procedures?	R		
38)	Is the recording equipment secure from unauthorized persons?	R		
39)	Will tapes be reviewed daily to ensure activity is being recorded?	R		
40)	Will the CCTV recording systems be supported by backup power capabilities?	R		
41)	Will the CCTV recordings be retained for at least 45 days pursuant to the Manual of Procedures?	R		
42)	Are there on-site personnel to monitor during business hours camera coverage and recording systems to ensure proper functionality?	_		

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For any question labeled with an "R" and a space below on why this requirement can put in place. Using question #40 above, the recording system does not have back-up if we lose power to the CCTV system, we restored and cameras are recording property.	not be met, a ne following is power capab do not proce	and indicate s an examp ilities; howe	any of a lever, of	compensating a possible res our internal pi	g controls that will be sponse: "our CCTV rocedures require that
Section 4: Authorized Approva	n i				
Authorized Signer Name	First		МІ	Last	
Authorized Signer Title					
Authorized Signer Email Address					
Authorized Signer Phone Number	Country Code	Phone			Extension
Authorized Signature					
Date					
This application will not be accepted if th institution's Official Authorization List (Or individuals to your institution's OAL, visit	AL). To comp	olete an OA			

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Federal Reserve Use Only		
☐ Signature Verification	☐ Callback	☐ Known Con
Date:	_ Time:	
DI Contact:		
FRB Contact:		
Number Called/Ext:		

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