

**NOTICE OF INTENT TO ENGAGE IN BUSINESS AS A PRIVATE TRUST COMPANY**

\_\_\_\_\_  
(Name of Private Trust Company)

\_\_\_\_\_  
(Mailing Address)

hereby gives notice to the State Corporation Commission’s Bureau of Financial Institutions, pursuant to Chapter 10, Title 6.2, Article 5 of the Code of Virginia, of its intent to engage in business as a private trust company.

**In support of the notice the following information is being submitted:**

1. The identity of the “designated relative” whose relationship to other individuals determines whether the individuals are “family members.”
2. The location [street address, city or town, and zip code] of the principal office and additional office, if applicable.
3. The company’s operating plan.

As a general rule, documents filed with the Bureau of Financial Institutions become part of the public record. Upon request, the Bureau will consider for confidential treatment documents or portions of the application that the applicant considers of a proprietary and personal nature. The request for confidential treatment must discuss the justification for the requested treatment, specifically demonstrating the harm (for example, loss of competitive position or invasion of privacy) that may result from public release of the information. Information for which confidential treatment is requested should be: (1) specifically identified in the public portion of the application (by reference to the confidential section); and (2) specifically separated and labeled "Confidential". The Bureau will advise the applicant if the request for confidentiality cannot be honored.

To view the entire Confidentiality Policy Statement of the Bureau of Financial Institutions or to download forms, visit the Bureau’s website at [www.scc.virginia.gov/bfi](http://www.scc.virginia.gov/bfi).

Inquiries concerning the preparation and filing of this notice should be directed to the Bureau of Financial Institutions, 1300 East Main Street, Suite 800, Post Office Box 640, Richmond, Virginia 23218-0640. Telephone: (804)371-9690; FAX: (804)371-9416.

**CERTIFICATION**

The undersigned, being duly sworn, certifies that he/she believes the facts as contained in this notice and any accompanying schedules and statements are true, and that he/she has been duly authorized to file this notice. Furthermore, pursuant to § 6.2-1075 of the Code of Virginia, the undersigned certifies that (a) all provisions of law have been complied with; (b) the private trust company is formed for no other reason than to engage in the private trust business; and (c) family members have subscribed for capital stock, surplus, and a reserve for operation in an amount equal to or in excess of \$500,000.

\_\_\_\_\_  
Name (Type or Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone Number/E-mail Address

\_\_\_\_\_  
Title

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

Registration Number of Notary: \_\_\_\_\_

My commission expires: \_\_\_\_\_