



**MARYLAND COMMISSIONER OF  
FINANCIAL REGULATION**  
APPLICATION OR FORM



**Application to Establish a Representative Office  
of a Foreign Bank Corporation**

**Instructions:** A completed application for each non-branch representative office to be established in Maryland by a foreign banking corporation, out-of-state bank or a national/federal bank not headquartered in Maryland must be submitted to:

Office of the Commissioner of Financial Regulation, Corporate Activities, 1100 North Eutaw Street; Suite 611, Baltimore, Maryland 21201 or [DLFRFinReg-LABOR@maryland.gov](mailto:DLFRFinReg-LABOR@maryland.gov).

A non-refundable filing fee of \$500 is required. Please submit the filing fee by check made payable to the Commissioner of Financial Regulation, with your application or inquire for wire instructions.

Upon approval, a Foreign Bank Representative Office Permit will be issued by the Office of the Commissioner of Financial Regulation, which is valid for three years. Permits may be renewed at the end of the three years. Refer to [FI § 12-201](#) et seq.

Exemption: A foreign banking corporation that maintains another license issued by the Commissioner is exempt from obtaining a permit in accordance with Md. Code Ann., Fin. Inst. (“FI”) [FI § 12-207\(b\)](#).

**Pursuant to the requirements of [FI § 12-208](#), this application is hereby made by the following foreign banking corporation to establish a (non-branch) representative office in Maryland:**

Name of Foreign Bank: \_\_\_\_\_

Address of Principal Office: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Direct Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Type of Office in Maryland: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Address of Proposed Office in Maryland: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Specific description of services and proposed operations to be offered at this location:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**By my signature below, I certify that:**

**1) The information provided by the foreign banking corporation is accurate, complete, and true, and that the activities to be conducted in this representative office will be limited to those described above; and**

**2) Deposits will not be accepted, checks will not be cashed, and loan proceeds will not be disbursed at this location.**

\_\_\_\_\_  
Print Name (*must be corporate officer*)                      Title

\_\_\_\_\_  
Signature    Date

Please provide written notification to the Office of the Commissioner of Financial Regulation of any changes to the office address or status.

For questions about this application, please contact Michelle A. Denoncourt, Assistant Commissioner by phone at (410) 230-6104 or by email at [michelle.denoncourt@maryland.gov](mailto:michelle.denoncourt@maryland.gov).

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*The Office of the Commissioner of Financial Regulation, a division of the Maryland Department of Labor, is Maryland's consumer financial protection agency and financial services regulator. For more information, please visit our website at [www.labor.maryland.gov/finance](http://www.labor.maryland.gov/finance).*

