

**WASHINGTON SMALL BUSINESS
RETIREMENT MARKETPLACE
APPLICATION FOR VERIFICATION**



Pursuant to RCW 43.330.730 – RCW 43.330.750, RCW 43.320.180, and Chapter 208-710 WAC

Item 1. Financial Services Firm

Name of Financial Services Firm: <input type="text"/>	Type of Application: <input checked="" type="radio"/> Initial <input type="radio"/> Amendment <input type="radio"/> Renewal DFI File Number (if previously assigned): <input type="text"/>
Prior Name (if any): <input type="text"/>	
Name of the Retirement Plan to be offered on the Marketplace: <input type="text"/>	

Is the Financial Service Firm regulated by a Banking, Credit Union, Securities, or Broker-Dealer Regulator? <input type="radio"/> Yes <input type="radio"/> No	
Name of Banking, Securities, Credit Union, or Broker-Dealer Regulator(s):	<input type="text"/>
Is the Financial Services Firm currently licensed and in good standing with its Regulator(s)? <input type="radio"/> Yes <input type="radio"/> No	
File/License Number (if any):	<input type="text"/>
License Expiration Date (if any):	<input type="text"/>

Item 2. Principal Place of Business

Street Address Line 1 <input type="text"/>	Street Address Line 2 <input type="text"/>		
City <input type="text"/>	State/Province/Country <input type="text"/>	ZIP/Postal Code <input type="text"/>	Phone No. <input type="text"/>

Item 3. Contact Person

Directions: Provide the name and contact information for the person to contact with questions about the filing of this application.

Last Name <input type="text"/>	First Name <input type="text"/>	Firm Name <input type="text"/>
Street Address Line 1 <input type="text"/>	Street Address Line 2 <input type="text"/>	
City <input type="text"/>	State/Province/Country <input type="text"/>	ZIP/Postal Code <input type="text"/>
Phone <input type="text"/>	Fax <input type="text"/>	E-mail <input type="text"/>

Item 4. Information about the Retirement Plan

Please attach the following Exhibits to this application:

- A copy of the Retirement Plan Agreement;
- A copy of the materials routinely used to market the Retirement Plan to eligible employers and/or individuals;
- The Prospectus for each balanced fund, target date fund, or other fund offered under the Retirement Plan; and
- If the above-listed documents do not (1) identify the funds and other investment products to be offered under the Plan; (2) specify the Plan's fees and roll-over options; or (3) disclose historical investment performance for the investment products in the Plan, please submit additional documentation in order to provide this information.

Item 5. Signature and Submission

The Department of Financial Institutions will review the Financial Service Firm's application materials to verify whether the Retirement Plan and the Firm meet the requirements set forth in RCW 43.330.732(7) and RCW 43.330.735. The Financial Services Firm understands that it must separately apply to the Department of Commerce for listing on the Washington Small Business Retirement Marketplace. The Financial Services Firm further understands that the Department of Commerce will not approve the Retirement Plan for listing unless the Department of Financial Institutions has issued a currently effective Verification Letter.

A Verification Letter will be effective for one year. Pursuant to WAC 208-710-060, the Financial Services Firm may apply for renewal for additional one-year periods. Pursuant to WAC 208-710-070, the Financial Services Firm must file an amended application if material amendments to the Retirement Plan or its underlying investment options are proposed.

The Financial Services Firm has read this application, knows the contents to be true, and has duly caused this application to be signed on its behalf by the undersigned duly authorized person.

Signature

Name of Signer (Print)

Title

Date

Please mail your completed application form to the following address:

Washington Dept. of Financial Institutions
Securities Division
P.O. Box 9033
Olympia, WA 98507-9033