



[FRBservices.org](http://FRBservices.org)

# Federal Reserve Bank FedCash® Services Request Form

Servicing FRB Office: \_\_\_\_\_

Effective Date: \_\_\_\_\_

## Federal Reserve Use Only

Sig. Verification     Callback     Known Contact

Date: \_\_\_\_\_ Time: \_\_\_\_\_

DI Contact: \_\_\_\_\_

FRB Contact: \_\_\_\_\_

Number Called/Ext: \_\_\_\_\_

**This form is used to establish service for a new endpoint, change, add or cancel service for an existing endpoint, or to process changes to the armored carrier that provides your Cash transportation services to/from the FRB dock. The Federal Reserve requires five business days notice for any of these requests. For additional requirements regarding your armored carrier, please refer to Section 7.1 of the Cash Services Manual of Procedures (CSMOP). This form cannot be used to request access to FedLine Web. You can find information on requesting access to FedLine Web at the following link: <http://www.frbservices.org/servicesetup/index.html>**

### Section 1 – Customer Service Request *(check all that apply)*

Service Request	<input type="checkbox"/> New Branch Setup	<input type="checkbox"/> Change Current Branch Information
	<input type="checkbox"/> Cancel Branch Services	<input type="checkbox"/> Change Armored Carrier Information

### Section 2 – Cash Services *(check all that apply)*

Note: The only Order/Deposit Notification System is FedLine Web.

Service Types	<input type="checkbox"/> Currency Orders	<input type="checkbox"/> Currency Deposits
	<input type="checkbox"/> Coin Orders	<input type="checkbox"/> Coin Deposits

### Section 3 – Financial Institution Information *(all fields must be completed).*

Financial Institution Name			
Routing ABA Number			
Requestor Name	<i>First</i>	<i>Middle Initial</i>	<i>Last</i>
Title			
Telephone	<i>Phone</i>	<i>Extension</i>	
Email Address			

### Current/New Branch and Carrier Information *(all fields must be completed):*

If an armored carrier, or other third party, provides cash vault services for your institution, please list the carrier name as the branch name along with their assigned branch number, and use the carrier's address for the street address.

Branch Name			
Branch Number			
Street Address <i>for currency and coin shipments</i>			
City			
State			
Zip Code			
Contact Name <i>If different from requestor</i>	<i>First</i>	<i>Middle Initial</i>	<i>Last</i>

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## Section 3 (continued) – Financial Institution Information

Telephone	Phone	Extension
Email Address		
<b>Carrier Name</b> (and carrier run, if applicable) If changing Armored Carrier, list your current carrier here; then in the “ <b>Change To</b> ” section below, complete the <b>Carrier Name</b> field.		
FRB Ship-Date <i>Check all that apply</i>	<input type="checkbox"/> Monday <input type="checkbox"/> Wednesday <input type="checkbox"/> Friday	<input type="checkbox"/> Tuesday <input type="checkbox"/> Thursday <input type="checkbox"/> Daily*

### Change To:

Complete only applicable sections (if changing armored carrier(s), complete the “Carrier Name” field ONLY).

Branch Name			
Branch Number			
Street Address <i>for currency and coin shipments</i>			
City			
State			
Zip Code			
Contact Name <i>If different from requestor</i>	First	Middle Initial	Last
Telephone	Phone	Extension	
Fax Number	Number	Extension	
Email Address			
<b>Carrier Name</b> (and carrier run if applicable) If changing Armored Carrier, list new carrier name here.			
FRB Ship-Date <i>Check all that apply</i>	<input type="checkbox"/> Monday <input type="checkbox"/> Wednesday <input type="checkbox"/> Friday	<input type="checkbox"/> Tuesday <input type="checkbox"/> Thursday	<input type="checkbox"/> Daily*

### Mailing Address:

(for notices, correspondence, mailings, and circulars)

Street Address	
City	
State	

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## Section 3 (continued) – Financial Institution Information

Zip Code			
Contact Name <i>If different from requestor</i>	<i>First</i>	<i>Middle Initial</i>	<i>Last</i>
Title			
Telephone	<i>Phone</i>	<i>Extension</i>	
Email Address			

### Administrative Address:

*(for adjustments and difference advices)*

Street Address			
City			
State			
Zip Code			

## Section 4 – Authorized Signature from Official Authorization List

Name	<i>First</i>	<i>Middle Initial</i>	<i>Last</i>
Title			
Email Address			
Signature			
Date			
Telephone	<i>Phone</i>	<i>Extension</i>	

*The completed form should be faxed/e-mailed to your servicing FRB or Customer Support Help Desk as appropriate.*

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\*When available in your servicing Federal Reserve Bank office.