

# Survey Letter

OCC Letterhead

Date

Name

Bank Name

Street Address

City, State, Zip Code

Subject: <Filing type, description and CAIS Control Number >

Dear Mr. or Ms. (Name):

Today we sent you our decision for the subject application. To provide better and more efficient services, we would appreciate your opinion of our service in processing your application. Your response may be faxed to (202) 874-5293 or mailed to the Comptroller of the Currency, Licensing Activities, Mail Stop 7-13, 250 E Street, SW, Washington, DC 20219-0001.

Outstanding	Good	Satisfactory	Fair	Poor	Not Rated	Rate the quality of our service by circling a response.
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|---|---|---|---|---|----|---|
| 1 | 2 | 3 | 4 | 5 | NR | Subject knowledge of the primary Licensing contact person.  |
| 1 | 2 | 3 | 4 | 5 | NR | Professionalism and courtesy of the Licensing staff.  |
| 1 | 2 | 3 | 4 | 5 | NR | Timeliness of our decision.   |
| 1 | 2 | 3 | 4 | 5 | NR | Quality of written guidance (for example, handouts, <i>Comptroller's Licensing Manual</i> , Internet Web site). |
| 1 | 2 | 3 | 4 | 5 | NR | Overall rating for our handling of your application.  |

1. Are you aware of the OCC's new e-Corp electronic application filing system?  Yes  No
2. If no, would you like additional information?  Yes  No
3. Did you file this application through e-Corp?  Yes  No (If no, skip Question No. 4.)

4. If yes, how do you rate the ease of use of the e-Corp system (circle 1 through 5).

1    2    3    4    5    NR            Ease of application process through e-Corp

5. If no, is there a reason you chose not to use e-Corp for this application?

Type of filing not available on e-Corp.

Other reason as described below:

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6. Your additional comments may help improve the quality of our licensing services, especially if your rating in any area is other than 1 or 2. Comment below or attach an additional sheet:

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If you have other comments or questions, contact Licensing Activities in Washington at (202) 874-5060.

Sincerely,

<Name >  
Senior Licensing Analyst