



National Settlement Service (NSS) Agent Contact Information Form

***Required Fields**

Section 1: Service Description and Form Instructions

The Agent Contact Information Form is used by a Settlement Agent to provide the Federal Reserve Banks with the contact information of individuals authorized as contacts for the Settlement Agent for all NSS-related operational matters relating to the Settlement Agent and the Settlement Arrangement(s) for which it has been designated to act as agent. These NSS-related operational matters include, but are not limited to, file rejects, changes to arrangement profile information, and general inquiries or communications. The authorized contacts also are authorized to submit the NSS Participant/Settler Update Form (NSS-03).

Please use section 3 to add, update, or delete the contact information for authorized contacts. Group email addresses and central/group phone numbers may be used. For international numbers, please provide the country code. If all additions, updates, and deletions do not fit on this form, please submit as many additional completed and signed copies of this form as needed.

The form must be signed by an individual on the Settlement Agent’s Official Authorization List (OAL) currently on file with the Federal Reserve Banks using an ink signature or an electronic signature that is acceptable to the Federal Reserve Banks. Please retain a copy of the completed form for your records. Any form that is incomplete will be returned to the sender. Each term used, but not defined, in this form has the meaning given to such term in the Federal Reserve Banks’ Operating Circular 12.

For assistance completing this form, please contact NSS Central Services Support Staff (CSSS) at 1-800-758-9403 or CSSS.STAFF@ny.frb.org.

Send completed forms to CSSS:

Email: CSSS.STAFF@ny.frb.org or Fax: 201-531-3590

Section 2: Settlement Agent and Settlement Arrangement Information

Settlement Agent Name*	
To identify the Settlement Agent, please select and provide one of the following*	<input type="checkbox"/> Customer Identification Number (CIN): _____ <small>(Note: Settlement Agent CINs are typically provided by CSSS)</small> <input type="checkbox"/> Routing Transit Number (RTN): _____ <input type="checkbox"/> Electronic Transaction Identifier (ETI): _____

Section 4: Authorization

The individuals listed in section 3 are authorized as contacts for the Settlement Agent regarding the NSS-related operational matters described in section 1 and are authorized to submit the NSS Participant/Settler Update Form for the Settlement Agent. The authorization for each individual will remain in effect until CSSS has received and processed a new Agent Contact Information Form that updates or deletes the authorization for that individual and has had a reasonable opportunity to process it.

The undersigned is submitting this form on behalf of the Settlement Agent identified in section 2.

The signer of this form must appear as an authorized individual on the Settlement Agent's OAL currently on file with the Federal Reserve Banks.

Authorized Signer Name*	<small>First</small>	<small>MI</small>	<small>Last</small>
Authorized Signer Title*			
Authorized Signer Email Address*			
Authorized Signer Phone Number*	<small>Country Code</small>	<small>Phone</small>	<small>Extension</small>
Authorized Signature*			
Date*			

NSS Staff Use Only Updated By: _____ Verified By: _____ Date: _____

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