



The Commonwealth of Massachusetts
William Francis Galvin, Secretary of the Commonwealth
Securities Division

BD AGENT DEFERRAL REQUEST FORM

_____ (CRD No. _____) (the "Applicant") hereby amends
Name of Individual

his/her application for registration as an agent of _____

Name of Firm

in Massachusetts and requests a deferral of the thirty-day time period set forth in Mass. Gen. Laws c. 110A § 202(a) for action by the Massachusetts Securities Division with respect to the application.

The undersigned hereby certifies that he/she has the authority to amend the application and make this request on behalf of the Applicant and does so pursuant to that authority.

Signature

Printed Name and Title

Date

Please complete and return via e-mail to brokerdealer@sec.state.ma.us or fax to (617) 248-0177