



APPLICATION FOR INTERNET BANKING FACILITY

Dear Sir/Madam,

I/We wish to apply for the Internet Banking Facility and given below my/our details to enable you to process the application.

Bank use only.

Name of Individual Customer/ Company/Organisation.

CIF No.

CONTACT DETAILS.

Postal Address	
Telephone No.	
Mobile No.	
Email Address	

Accounts to be linked: (Savings/Current a/c) FIXED DEPOSITS & LOAN ACCOUNTS (Enquiry Only)

1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____
5. _____	5. _____

TRANSACTIONS TYPE & LIMITS

Transaction Types	Bank Transaction limits	Limit request
Own Account Transfers	SBD 5,000.00	
Third Party Transfers (within POB)	SBD 5,000.00	
Other Banks Transfer- ATS (POB to other Banks)	SBD 5,000.00	
Bulk Transfers		
Own Account to Purse		

I/We hereby confirm that the information given above is true and correct. I/We further confirm that I/We have read and understood the terms and conditions governing Internet Banking Facility. I/We hereby agree to abide by them and to subsequent amendments, variations, or charges there to which may at any time be made by the Bank.

Authorize Signatories

Name: Signature:.....

Name: Signature:.....

Name: Signature:.....

Name: Signature:.....

Official Use only (Operations Department)

Customer Verified By:

Staff Name: Signature:

Customer Approved By:

Name: Signature:

Official use only (Digital & IT Department)

Application Captured By:
Name:.....Signature:.....
Application Authorized By:
Name:.....Signature:.....
Password Print By:
Name:.....Signature:.....
Customer Verified By:
Name:.....Signature:.....
Accounts Link & Limit Setup By:
Name:.....Signature:.....
Application Audited By:
Name:.....Signature:.....
If partnership all partners signature required If company accounts all authorized signatures and board resolution required.