

COMPANY INFORMATIONCompany: Contact Name: Job Title: E-mail: Address: Mailing: Phone: (Business) (Cell) (Fax) Would you like to de-register paper statements? Yes No

<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Name (print)	Date (DD/MMM/YYYY)

<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Name (print)	Date (DD/MMM/YYYY)

All signing pages should be signed by the Authorised Signatories as per the current Corporate Resolution/Mandate.

USER INFORMATION (This page can be replicated as required)Company Name: **User contact details**User First Name: User Last Name: Date of Birth: (DD/MMM/YYYY) Telephone Contact: E-mail: User First Name: User Last Name: Date of Birth: (DD/MMM/YYYY) Telephone Contact: E-mail: User First Name: User Last Name: Date of Birth: (DD/MMM/YYYY) Telephone Contact: E-mail: User First Name: User Last Name: Date of Birth: (DD/MMM/YYYY) Telephone Contact: E-mail: Signature Name (print) Date (DD/MMM/YYYY) Signature Name (print) Date (DD/MMM/YYYY) **All signing pages should be signed by the Authorised Signatories as per the current Corporate Resolution/Mandate.**

ACCOUNTS AND ACCESS RIGHTS INFORMATION (This page can be replicated as required)

Company Name: **User Name: (Bank use only)**

 Place a check in the box to grant access to all accounts owned by this company and select the access rights for the above user **OR** enter the desired account number and select the access rights for the above user.

Account Number:

Balance & Statement	<input type="checkbox"/>	View			
Own Account Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Internal Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Domestic Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Mutual Fund Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Draft	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Wire Transfer	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Bill Payment	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Payroll Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>

Payroll Account Number:
User Name: (Bank use only)

 Place a check in the box to grant access to all accounts owned by this company and select the access rights for the above user **OR** enter the desired account number and select the access rights for the above user.

Account Number:

Balance & Statement	<input type="checkbox"/>	View			
Own Account Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Internal Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Domestic Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Mutual Fund Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Draft	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Wire Transfer	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Bill Payment	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>
Payroll Transfers	<input type="checkbox"/>	Create	<input type="checkbox"/>	Authorise	<input type="checkbox"/>
				Self-Authorise	Limit \$ <input type="text"/>

Payroll Account Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Name (print)	Date (DD/MMM/YYYY)

<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Name (print)	Date (DD/MMM/YYYY)

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EDI TRANSMISSION INFORMATION (This page can be replicated as required)

Company Name:

 Duplicate file check period? (# of days to check for duplicates, e.g. suggest a maximum of 10 days for weekly and 35 days for monthly files)

 Effective entry date? No Yes If **Yes**, indicate maximum number of days into future the effective entry date can be set:
Permit the following Users to initiate file transfers on the behalf of the organisation.

User Login ID*: (8-14 Characters)

User Name: (8-14 Characters)

1
2

*Only complete if you have an existing User Login ID

EDI related fees/charges will be deducted from the account you have provided below.

Account Number:

Account Name:

CIF #: (Bank use only)

Clearing Account Numbers (accounts used by bank to auto balance if necessary)

 BMD (060) (Bermuda)

 CAD (124) (Canada)

 CTBP (826) (British Pound)

 USD (840) (US Dollars)

Originator Limits (upper dollar limit)

Per item:

Per day:

Per file:

EDI Contact Information

Name:

Telephone:

Fax:

E-mail:

Name:

Telephone:

Fax:

E-mail:

Please note: The file extension **must** be **“.ach”, “.dat”** or **“.txt”** and the size should not exceed **300k**.

Signature

Name (print)

Date (DD/MMM/YYYY)

Signature

Name (print)

Date (DD/MMM/YYYY)

All signing pages should be signed by the Authorised Signatories as per the current Corporate Resolution/Mandate.