

Corporate Group ID

Company Name  CIF No (CIF No. is the last 6 digits of the company's account number)

**1 User Account(s)**

**Accounts Number**

1.   -   -     -

2.   -   -     -

3.   -   -     -

4.   -   -     -

5.   -   -     -

6.   -   -     -

7.   -   -     -

8.   -   -     -

**Credit Card Number**

9.

10.

11.

**HP Account Number**

12.       /   /   /

13.       /   /   /

**2 Daily Transaction Limit**

Fund Transfer  
 Maximum allowed limit is BND1,000,000  
  
 Default is BND100,000 if left blank

Bill Payment  
 Maximum allowed limit is BND1,000,000  
  
 Default is BND100,000 if left blank

Standing Instructions  
 Maximum allowed limit is BND1,000,000  
  
 Default is BND100,000 if left blank

### 3 Authorization Rule

Please input the authorization rule required for each threshold amount for transactions. Eg. BND1001 to BND10,000 requires Any Two authorizers.

To add more authorization instructions, please insert a new 'Section 3. Authorization Rule' page

- All debits account      or       Specific debit account:   
 All services              or       Fund Transfers       Bill Payment       Payroll       Others

Follow the authorization rules as stated in:

- The Account Mandate dated       or       As per the completed table below

Threshold Amount (BND)		Authorization Requirement	
From	To		
0		No. of Authorizer(s) required <input type="checkbox"/> Any One Authorizer <input type="checkbox"/> Any Two Authorizer	Required Combination of Authorised Signatures <b>OR</b> <input type="text"/>
		No. of Authorizer(s) required <input type="checkbox"/> Any One Authorizer <input type="checkbox"/> Any Two Authorizer	Required Combination of Authorised Signatures <b>OR</b> <input type="text"/>
		No. of Authorizer(s) required <input type="checkbox"/> Any One Authorizer <input type="checkbox"/> Any Two Authorizer	Required Combination of Authorised Signatures <b>OR</b> <input type="text"/>

Other instructions:

## 4 Remove Company user(s)

To remove more Users, please insert a new 'Section 4. Remove Company user(s)' page.

1. 

Name:	IC Number:
Reason:	User ID:
2. 

Name:	IC Number:
Reason:	User ID:
3. 

Name:	IC Number:
Reason:	User ID:
4. 

Name:	IC Number:
Reason:	User ID:
5. 

Name:	IC Number:
Reason:	User ID:
6. 

Name:	IC Number:
Reason:	User ID:
7. 

Name:	IC Number:
Reason:	User ID:
8. 

Name:	IC Number:
Reason:	User ID:



**7 Declaration by Authorized Persons / Sole Proprietor / Partners and Company Appointed Users**

I/We hereby:

Confirm that I/we have read, understood and agreed to be bound by:

- (a) the b.Digital Business Terms & Conditions and Disclaimer issued to me/us upon my/our application and;
- (b) the Bank's standard Terms & Conditions Governing Accounts maintained with the Bank in respect of all my/our existing future accounts opened or to be opened with the bank.

I/We are aware that the Disclaimer and both the Terms & Conditions Governing Accounts maintained with the Bank and for the Baiduri b.Digital Business are available for viewing on the Bank's website. I/We further confirm and agree that the Bank reserves the right, without prior notice to me/us, to change, revise and modify the Disclaimer and the above Terms & Conditions and I/we agree to be bound by all changes made or modified at any time and from time to time.

Confirm and agree that all the information provided herein is true and accurate to the best of my/our knowledge as at the date of this application.

\*Please delete when appropriate.

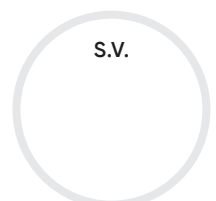
**Authorized Signatories**

Name:	Name:	Name:
IC/Passport No:	IC/Passport No:	IC/Passport No:
Specimen Signature <b>SIGN HERE</b>	Specimen Signature <b>SIGN HERE</b>	Specimen Signature <b>SIGN HERE</b>

**Company Appointed Users**

Name:	Name:	Name:
IC/Passport No:	IC/Passport No:	IC/Passport No:
Specimen Signature <b>SIGN HERE</b>	Specimen Signature <b>SIGN HERE</b>	Specimen Signature <b>SIGN HERE</b>
Name:	Name:	Name:
IC/Passport No:	IC/Passport No:	IC/Passport No:
Specimen Signature <b>SIGN HERE</b>	Specimen Signature <b>SIGN HERE</b>	Specimen Signature <b>SIGN HERE</b>

**Company Seal (if required)**



**FOR BRANCH USE ONLY**

User Name	User CIF	Hardcopy	Flexcube
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Attended by:  Initial:   
Checked by:  Initial:   
Date:

Branch Chop

**FOR DIGITAL BANKING USE ONLY**

Inputted by:  Initial:  Date:   
Authorized by:  Initial:  Date: