

APPLICATION FORM

1 Company Profile

Note: CIF No. is the last 6 digits of the Company's account number

Company Name:		CIF No:							
		<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>							
Registration No:	Date of Registration:	Email Address:							
Mailing Address:		Tel No:							
Postal Code:		Fax No:							

2 Appointment of Company User(s)

1	Name:	Designation			
	IC/Passport No:	Colour:	(Y)	(P)	(G)
	Email Address:	Tel No: (O) (M)			
2	Name:	Designation			
	IC/Passport No:	Colour:	(Y)	(P)	(G)
	Email Address:	Tel No: (O) (M)			
3	Name:	Designation			
	IC/Passport No:	Colour:	(Y)	(P)	(G)
	Email Address:	Tel No: (O) (M)			
4	Name:	Designation			
	IC/Passport No:	Colour:	(Y)	(P)	(G)
	Email Address:	Tel No: (O) (M)			
5	Name:	Designation			
	IC/Passport No:	Colour:	(Y)	(P)	(G)
	Email Address:	Tel No: (O) (M)			
6	Name:	Designation			
	IC/Passport No:	Colour:	(Y)	(P)	(G)
	Email Address:	Tel No: (O) (M)			

*Please attach form for additional company users.

3 Account(s) to be accessed and User Function(s)

Please indicate the Company account(s) to be accessed and define the User function(s) for each appointed user as specified in Section 2 accordingly by circling letters P/I/V/A alongside the corresponding account number(s) below. Each appointed user may be assigned one or more of the following User function(s):

P - Privileged User	This function allows User(s) to set lower daily transaction limits, requests higher daily transaction limits, suspend user(s) and perform account sweep. Typically, this function can be assigned to anyone duly authorized by the company directors/sole proprietor/partners.
I - Input	This function allows User(s) to create transactions, applications and view transaction statuses. Typically, this function can be assigned to accounts clerks.
V - View	This function allows User(s) to view account summary, deposits, limit enquiry, etc. Typically, this function can be assigned to supervisors.
A - Authorize	This function allows User(s) to perform transaction authorization and must be assigned to designated company signatory(ies) only.

Account No.	User 1	User 2	User 3	User 4	User 5	User 6
1	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
2	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
3	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
4	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
5	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
6	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
7	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
8	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
9	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
10	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
11	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
12	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
13	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
14	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
15	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
16	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
17	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A
18	P I V A	P I V A	P I V A	P I V A	P I V A	P I V A

*All alterations/amendments (if any) on the form must be duly initiated by designated company signatory(ies)

4 Corporate Card(s) to be linked

Please indicate the corporate card(s) to be linked and (√) the assigned users as specified in Section 2 for corporate card enquiries.

Corporate Card No.	User 1	User 2	User 3	User 4	User 5	User 6
1						
2						
3						
4						
5						

5 Authorization Rule

Transactions and Applications (Funds Transfer, Bill Payments, Payroll, Online Applications and Cheque Book Requests)

Any one of the company signatories
 Any two of the company signatories
 Other Instruction: _____

6**Collection of Token(s), User ID and Password Mailers**

1. I/We hereby authorize _____ *IC/Passport No. _____ to collect the Token(s), User ID and Password Mailers on my/our behalf.
2. I/We wish to collect the Token(s), User ID and Password PIN Mailers at _____ Branch.

7**Declaration by Company Directors / 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 Business i-Banking 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 Business i-Banking 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.
- Authorize the Bank to issue/Token(s), User ID and Password PIN Mailers to the authorized Baiduri Business i-Banking user. He/She or the person specified in Section 5 above may collect the Token(s), User ID and Password Mailers on behalf and return the signed Token(s), User ID and Password PIN Mailers acknowledgement. Upon receipt of the acknowledgement by the Bank, the Bank will then activate the Baiduri Business i-Banking service and make it available to the Company.
- Enclose the Director's resolution duly passed for the use and application of the Baiduri Business i-Banking Service (for limited company only)

*Please delete where appropriate

Company Directors* / Sole Proprietors / Partners

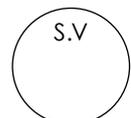
*(See point 4 of Director's Resolution)

Name: _____	Specimen Signature(s) _____
IC/Passport No: _____	_____
Name: _____	_____
IC/Passport No: _____	_____
Name: _____	_____
IC/Passport No: _____	_____

Company Appointed Users

Name: _____	Specimen Signature(s) _____
IC/Passport No: _____	_____
Name: _____	_____
IC/Passport No: _____	_____
Name: _____	_____
IC/Passport No: _____	_____
Name: _____	_____
IC/Passport No: _____	_____
Name: _____	_____
IC/Passport No: _____	_____

Company Seal (if required)



For Branch use only

Following documents attached:-

 IC/Passport of all applicant(s) Director Resolution (for limited company only)

Attended by:	Initial:	Branch Chop:
Checked by:	Initial:	
Date:		

For E-Banking use only

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