

## Corporate and Commercial Banking Online Banking Service Application Form

Section 1: Compar	ny Profile								
1.1 Company Details									
Company Name *	A         B         C         C         O         R         P         O         R         A         T         I         O         N         L         L         C         .								
1.2 Corporate Contact Details									
Primary Contact Person *	MOHAMMED SALEH   Mobile Number   9   7   1   5   X   X   X   X   X   X   X   X   X								
Job Title	GENERAL MANAGER  Telephone Number* 9 7 1 4 X X X X X X X X X X X X X X X X X X								
Department	FINANCE Fax Number* 9 7 1 4 X X X X X X X X								
E-mail Address	PRIMARY@ABC.AE								
Company Address									
* Mandatory									
Section 2 - Please	Tick The Services Required Please provide a tick ■ next to the service(s) required.								
Web Channel o	or								
Section 3: Account	Details								
CIF Number	Title of the Account								
1 2 3 4 5 6	, the same type								
3 4 5 6 7 8									
*									
Signature `									



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Section 4: User D	Details												
User 1													
Name (as per passport)	RAJESH First Name	Middle Name					SALA.						
User ID	R A J E S H 1 2 3 4  Maximum 10 Alphanumeric Characters	The mention	ned User ID h	ere will be the	User ID to	login f	or Onlii	ne bani	king				
Mobile Number *	9 7 1 5 0 X X X X X	X X		ne User ID will be ere. In case of "Pa									
Email Address *	RAJESH@ABC	. A E							L				
User Profile Type	☐ View Only ☐ Releaser	Authorise	r 🎻 Vi	ew and crea	ite 🗍	Verifie	er						
Account to be Restricted (please list if a user has to be restricted on accessing any account.)  01200XXXXXXXX (USD)													
Alert Type	Basic Transactional	All	Ø N	one									
User 2									1963				
Name (as per passport)	IQBAL First Name	ALI Middle Name	9				(HAN				_ //		
User ID	I Q B A L 1 2 3 4  Maximum 10 Alphanumeric Characters	The mentio	ned User ID h	ere will be the	User ID to	login f	or Onli	ne ban	king				
Mobile Number *	9 7 1 5 0 X X X X X	XX		ne User ID will be ere. In case of "Pa									
Email Address *	IQBAL@ABC.	AE				П	I						
User Profile Type	O. View Only Releaser	Authorise	r 🗇 V	ew and crea	ate 🗍	Verifie	er .						
Account to be Res (please list if a user has t restricted on accessing account.)	to be												
Alert Type	Basic Transactional	<b>⊘</b> All	□ N	one									
User 3									1				
Name (as per passport)	RAVI						KUMA						
User ID	First Name  R A V I 1 2 3 4  Maximum 10 Alphanumeric Characters	Middle Name The mentio		ere will be the	e User ID to		ast Nam For Onli		king				
Mobile Number *	9 7 1 5 0 X X X X X	XX	Care: Ti given he	he User ID will be ere. In case of "Pa	sent to the e assword re-se	email add et" the ne	ress and w passi	the pas word will	sword w	vill be s	ent on N Mobile I	lobile i numbe	numbei r
Email Address *	R A V I @ A B C . A	E									I	I	
User Profile Type	☐ View Only ☐ Releaser	Authorise	r 🗍 V	iew and crea	ate 🗍	Verifie	er						
Account to be Res (please list if a user has t restricted on accessing account.)	to be			4									
Alert Type	☐ Basic ☐ Transactional	<b>⊘</b> All		one									
*													

Version 1.01



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Section 5: Author	riser (s) Details												
Authoriser 1			avenusia ka ja sugu						No.	A KEL			
User ID		Token Type				obile T	Гокеп			Ī,			
Authoriser Group (Valid from A-F)	ould match User ID from Section 4.)	Signature							7				
Mailing Address (The VASCO Token will be sent on the mentioned mailing address)	MY ADDRESS	(please sign in the box)											
				X									
Authoriser 2													
User ID (User ID of Authoriser sho	R A V I 1 2 3 ould match User ID from Section 4.)	4	Token Type 🗸	VASCO Token	en 🧻 Mobile Token								
Authoriser Group (Valid from A-F)	С		Signature (please sign in										
Mailing Address (The VASCO Token will	MY ADDRESS		the box)										
be sent on the mentioned mailing address)	d			×									
			J [4				100,500000	NO.		FE SUSSIN	CORDINA DE		
Authoriser 3					HARR								
User ID (User ID of Authoriser sho	ould match User ID from Section 4.)		Token Type ళ	VASCO Token	M	obile <sup>-</sup>	Token	1					
Authoriser Group (Valid from A-F)			Signature (please sign in				-						
Mailing Address (The VASCO Token will			the box)										
be sent on the mentioned mailing address)	d												
			J L										
Authorization Rule  Payment / Trade Authorization Rule			Follow - Hiera	archy	Uppe	r Limit	(AED	))					
PAYMENT AND TRADE H+D			]						0	0	0	0	
PAYMENT AND TRADE H+C		<b></b> ✓ Yes	) No	0	0 0	5	0	0	0	0	0		
PAYMENT AND TRADE H+D+C		✓ Yes	) No	1	0 0	0	0	0	0	0	0		
			<b>⊘</b> Yes ○	) No	П			T	T		T		
Maximum Transac	ction Limit (AED) (if other than defau	(1)			1				-				
Daily		Weekly		Monthly						T			
Company Authoris	sation								,				
									1 -		4		
×			X										
Authorised Signature, Company Stamp  Authorised Signature, Comp		pany Stamp	Authorised	Signatu	ure, Co	ompar	ny S	tamp	)				
Date Date				Date									
Name and title		Name and title		Name and title									