

New Request

Modification to Existing

Date:

**Customer Information**

Company Name		Primary EIN	
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**Online Banking Administrator Information**

Primary Admin Name			
Email Address		Mobile Phone (Needed for Login Access)	
Secondary Admin Name* (if applicable)			
Email Address:		Mobile Phone (Needed for Login Access)	

\*When adding a Secondary Admin, a secondary approval for all templates and additional users is necessary.

**Additional Businesses / EINs (to view under primary)**

Company Name		EIN	
Company Name		EIN	

**Account Information**

Account Number	Basic	Wire Transfers	ACH Debit	ACH Credit	Positive Pay	Payee Positive Pay

**Additional Services (Separate enrollment information required)**

Remote Deposit Capture	ePay	Rent Collector	Lockbox	ACH Pass-Thru
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**Online Wire Transfers Limits**

	Max Dollar Amount per Day	Approval Threshold <small>Secondary approval not needed under this amount</small>
Domestic Wires		
International Wires		

**ACH Originations**

ACH Entry Type(s)	Max Dollar Amount Per Day	File Submission Format	Approval Threshold <small>Secondary approval not needed under this amount</small>
Send Payments to Consumers/Business (Debit)			
Collect Money from Consumers/Business (Credit)			

**EDI**

ACH Return Notification Email Address:		Secondary Email Address:	
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**Authorized Signature**

BY SIGNING BELOW, I/we request and authorize access to the above accounts through the Online Business Banking Service, and use of the access features indicated above; and authorize and agree to the designation of an administrator as indicated, with all of the associated powers and authority that are conferred with that designation. I/we acknowledge that I/we am/are an owner or authorized representative of each Company/Entity and duly authorized to complete this enrollment form. I understand a fee may apply if adding additional services. All services are subject to approval by the Bank.

I/We also acknowledge receipt of the Customer Agreement and Disclosure Statement and Addendums, and I/we will comply with the terms and conditions therein with respect to the above-requested services.

Name		Title	
Signature		Date	

Fax completed forms to 708.460.5714 or email BEST@BankFinancial.com.