



System Administrator and/or payment authoriser security details

Please note – when filling out this form please use the tab and arrow keys to move between the relevant fields. Ensure you do not use the return or enter keys. Please complete in BLOCK CAPITALS.

When completed please send to:

Freepost JE738
eQ Helpdesk
JE1 1AF

If sending from outside the UK please send to:

eQ Helpdesk
Mail Room
Royal Bank House
71 Bath Street
St Helier
Jersey JE4 8PJ

This is a new application ☒ OR Replacement form ☒

Existing customer numbers

1. Customer details:

Full Business/Organisation name (including any trading name)

First name

Surname

User ID (if known)

Code/Security word (provided by yourself and used to identify you over the phone)

Prompt question for Code/Security word (Used as prompt if you have forgotten the Code/Security word e.g. mother's maiden name)

Date of birth

Preferred daytime contact number (including extension if applicable)

Email address

2. eQ Administrator/Payment Authoriser confirmation

I confirm that the information given is correct and I will notify the Bank of any changes.

eQ Administrator/Payment Authoriser signature

Date _____

Please note all the above fields are MANDATORY with the exception of the user ID and Customer Number. If any fields are missed or the form is not provided with the initial application, we will be unable to progress with this application form, as this information is required to activate smartcards and reset passwords.

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