

CORPORATE - Single User Registration Form



Date:
Day Month Year

Company Name: _____

Office Telephone: _____

Account Information

Account No.: _____

Relationship Mgr. Team e-mail address: _____

First Name	Last Name	E-mail	Mobile No.

Other Services

Cheque Confirmation NIBBS Instant payment to other Banks
Standing Instruction

Approval Information

Please note that all approvers are set up in accordance with the Bank's mandate. Non-signatories to the account(s) shall not be set-up as approver(s) until the board resolution authorizing such persons to act in that capacity is submitted to the bank.

Name: _____ Signature & Date: _____

Name: _____ Signature & Date: _____

For Official Use

Signature Verification: _____

Existing SV Stamp/Name

Treated by _____ Treated by _____

CES Officer (Name/Signature)

IT Officer (Name/Signature)