

eBanking Registration Form

Additional Requests

| Services | Internet E | Banking | Customer | Type | = | iness Custo sonal Custo | | Request | New Customer Change Details Delete |
|--|--------------------------|----------------|----------------------|---|-------------|---------------------------------------|-------------------|----------------------------------|------------------------------------|
| **Note - Pe | rsonal Internet E | Banking Custo | mers need to fill ir | n the Ma | ndatory f | ields for 2 Fa | ctor Authentico | ition. | |
| General | Customer In | formation | Name of Individu | al/Com _l | pany/Org | ganisation/I | Firm | | |
| Custome | r Name: | | | | | | CIF: [| | |
| Address: (If Company, provided full office addre | /Firm, registered | | | (TLB Personal Only) Phone Number: Fax Number: | | Number: [Number: [| | | |
| Occupation TBL Persons | | | | | | Email Address: Mother's Maiden Name: | | | |
| Internet | Banking | | | | | | | | |
| Account Name | | | Account Number | | | Nominee | | Nominee Name (TLB Business Only) | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Dlassa com | nloto Internet | Panking Daily Lim | oit Autho | rity / Form | for Dusiness | Licerc and corre | schonding fund | ctional access |
| Please complete Internet Banking Daily Limit Authority Form for Business Users and corresponding functional access. FUNCTIONAL ACCESS (For Internet Banking Only) | | | | | | | | | |
| | | | | | | internet E ninees can ad | | У) | |
| Nominee 1 Nominee 2 | | | · | Nominee 3 | | Nom | inee 4 | Nominee 5 | |
| Given Name Giv | | Giv | ven Name | | Given Name | | Given Name | | Given Name |
| Surname | |] | l | | me | LSurna | | Surname | |
| | arriarric | | | Julianie | | | Jamanic | | Samaric |
| | 71 | | 71 | | 1 | | | 1 | |
| | 2 | | 2 | | 2 | | 2 | | 2 |
| |]3 | | 3 | | 3 | | | 3 | 3 |
| | 4 | | 4 | | 4 | | | 4 | 4 |
| | 4a | | 4a | <u></u> 4a | | | 4a | | 4a |
| |] 5] | | 5 5 | | 5 | | | 5 | |
| |] 5b | | 5b | | 5b | | | 5b | 5b |
| <u> </u> |] 6] | | <u> </u> 6 | | <u></u> 6 | | | 6 | 6 |
| |] 6a] _{al} | | 6a | | 6a | | | 6a | 6a |
| <u> </u> |] 6b] _ | | _ 6b | | ∐ 6b | | | 6b | ☐ 6b |
| |]7]_ | | <u> </u> 7 | | | | | 7 | 7 |
| |]8]_ | | | | 8 | | | 8 | 8 |
| |] 8a] _{ol-} | | _ 8a | | 8a | | | 8a | 8a |
| | ∐ 8b | | 8b | | | | 8b | □ 8b | |
| | |] 9 | | | | 9 9a | 9 9a | | |
| 9b [| | 9a 9b | 9a 9b | | | | 9a 9b | 9a | |
| | | 10 | | | | | 90 10 | 10 | |
| |] 10 | | | | | | | 11 | |
| | | | | | | | | | |
| | Banking Func | | Authorico*** | | | | d for Internet | _ | - |
| | : Information* | | Authorise*** | ago to/fro | m Pank | * Permit | access to Account | : Balances, Enqui | iry, Display Cheques Cleared, |

5b. = Authorise***

4a. = View Statement

5. = Transfer between OWN Account** 5a. = Initiate***

3. = Stop Payment of Cheque(s)

4. = Order Copy of Statement(s)

6. = Pay Others** 6a. = Initiate**

8. = Cash Advance**

8b. = Authorise***

9. = Credit Card Payment**

9a. = Initiate***

10. = Foreign Currency A/C VIEW ONLY

11. = Bulk Payment File Upload (Authorise Only)

- Last 10 Debits & Credits and Account History
- ** Only to be selected is Access Authority is being completed for Personal Access
- *** Only to be selected if Access Authority is being completed for Company/ Organisation / Firm access

(Note: Pay Others include Billpay, Overseas & Periodic Payments)



eBanking Registration Form

Customer Declaration and Acknowledgement

Internet Banking / Bank South Pacific Protect (2FA)

By signing this form the signatories:

- * (if the account holder is an individual/sole trader) agree to the following:
- To subscribe to a service of Bank South Pacific known as Internet Banking according to terms and conditions of use set by Bank South Pacific from time to time and of which we are aware and agree to be bound;
- 2. Acknowledge that Bank South Pacific may rely and act upon any use of the Customer Number and Password with regard to the Access authorised for a particular Customer Number and Password;
- 3. Acknowledge that any account authority the account holder may have with Bank South Pacific now or in the future and any amendments or cancellation thereto will not affect this Internet Banking authority which is to continue in full force until Bank South Pacific receives notice of amendments or cancellation and that in providing access to Internet Banking Bank South Pacific is not required to have regard to any account authority other than this Internet Banking Authority;
- 4. Acknowledge that functions of Internet Banking are conducted by a person acting alone, no provision exists for joint operation other than the Authoriser and Initiator functions referred to in the Internet Banking terms and conditions;
- 5. Consent to disclosure of my/our personal information to joint account holders or, where applicable, Nominees, when they view my/our statement of account;
- 6. Acknowledge that there is a default Internet Banking limit. For any further increase in Internet Banking limit request, an Internet Banking Limit form needs to be completed and sent to the Relationship Banking Manager/Bank Manager.
- 7. Where we are a company or organisation,
 - (a) Authorise Bank South Pacific to provide access to Internet Banking to the Nominees listed Bank South Pacific authority page and the Daily Limit Authority for the Access and Daily Limit specified for that person. The account holder will advise Bank South Pacific of any change to the Nominees, the permitted Access or Daily Limit
 - (b) Understand the Password will only be issued by the Bank South Pacific to the nominated Nominee(s) and that the Nominee may change the Password;
- 8. Credit card accounts can also be registered with Internet Banking subject to their assigned credit account or Internet Banking limit. Whichever is the lower of the two limits, will allow customers to transact successfully online
- 9. Acknowledge that the Mobile Number provided in this form, under the section Internet Banking & Telephone Banking Account Access, is correct and shall be used for the purpose of 2 Factor Authentication (via SMS code) on my Internet Banking facility.

Customer Declaration

I acknowledge receipt of disclosure documents such as feature brochures, fees and charges etc for the Channels selected. I hereby agree and fully understand the Terms and Conditions for the Channels selected.

| Customer Name | Customer Signature | Date |
|---------------|--------------------|------|
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BANK USE ONLY

I certify that the information on this form is correct and is in accordance with the Bank's records of accounts.

| Signature Verified By | Authorisation Officer | Data Entry By | Checked By - Name |
|-----------------------|-----------------------|----------------|-------------------|
| Name | Name | Name/Salary No | Name |
| Signature | Signature | Signature | Signature |
| Date | Date | Date | Date |