



## ABC E-BANKING APPLICATION FORM

Company's Registered Name

.....

Email Address

.....

Postal Address

.....

Office Number

.....

Service type applied for *(Please tick as appropriate)* ☐ View Only ☐ Transaction

### USER INFORMATION - Applicant 1

Title (Mr/Mrs/Miss/Other)

.....

Last Name

.....

First Name

.....

Occupation

.....

Email address (Mandatory)

.....

ID No

.....

Postal address

.....

#### Security Questions:

Security Code (Maximum 8 characters)

.....

Name of your Primary School

.....

User Type (Please tick as appropriate)

☐ View Only ☐ Initiator ☐ Authoriser

Accounts to be accessed

.....

.....

.....

.....

Signature

.....

### USER INFORMATION - Applicant 2

Title (Mr/Mrs/Miss/Other)

.....

Last Name

.....

First Name

.....

Occupation

.....

Email address (Mandatory)

.....

ID No

.....

Postal address

.....

#### Security Questions:

Security Code (Maximum 8 characters)

.....

Name of your Primary School

.....

User Type (Please tick as appropriate)

☐ View Only ☐ Initiator ☐ Authoriser

Accounts to be accessed

.....

.....

.....

.....

Signature

.....

USER INFORMATION - Applicant 3

Title (Mr/Mrs/Miss/Other)  
.....

Last Name  
.....

First Name  
.....

Occupation  
.....

Email address (Mandatory)  
.....

ID No  
.....

Postal address  
.....

Security Questions:  
Security Code (Maximum 8 characters)  
.....

Name of your Primary School  
.....

User Type (Please tick as appropriate)  
☐ View Only    ☐ Initiator    ☐ Authoriser

Accounts to be accessed  
.....  
.....  
.....  
.....

Signature  
.....

PAYMENT AUTHORISATION LIMITS

Please note that your default daily payment limit is MUR ..... or its FCY equivalent.

PIN MAILERS

The Company hereby authorises ABC Banking Corporation Ltd (the Bank) to send the PIN Mailer by email to the email address mentioned above at the Company’s own risk and peril and the Bank will not be held responsible for any prejudice and/or loss suffered by the Company. The Company undertakes to keep the Bank indemnified at all times against all actions, proceedings, claims, loss, damage, costs and expenses which may be brought against the Bank or suffered or incurred by the Bank and which shall have arisen either directly or indirectly out of or in connection with the Bank accepting to send the PIN Mailer by email.

USER INFORMATION - Applicant 4

Title (Mr/Mrs/Miss/Other)  
.....

Last Name  
.....

First Name  
.....

Occupation  
.....

Email address (Mandatory)  
.....

ID No  
.....

Postal address  
.....

Security Questions:  
Security Code (Maximum 8 characters)  
.....

Name of your Primary School  
.....

User Type (Please tick as appropriate)  
☐ View Only    ☐ Initiator    ☐ Authoriser

Accounts to be accessed  
.....  
.....  
.....  
.....

Signature  
.....

..... (the "Company")

### DIRECTORS' RESOLUTIONS

Minutes of proceedings of meeting of Board of Directors of .....  
held on ..... at the registered office of the Company situated at .....  
It was resolved that:

(A) the Company's accounts with the Bank be accessed through the internet through the combination of a USER ID and PASSWORD and subject to the Terms and Conditions.

(B) the following person/s of the Company hereafter referred to "authorised person(s)" listed on the previous page is\*/are\* authorised on behalf of the Company to operate or to nominate and authorise any person/s to operate the Company's account through ABC e-Banking as agreed by the bank through the use a USER ID and PASSWORD.

(C) the Bank is hereby authorised to complete all such transactions requested through the use of such USER ID and PASSWORD including but limited to making credits to, debits or transfers from the Company's account(s) and any other banking transactions.

(D) the secretary of the Company be, and hereby authorised to certify to the Bank the name of the present officers of the Company authorised in terms of this resolution, together with specimens of their signatures. In the event that the Company appoints another authorised person in place of existing user, the Company shall submit to the Bank a resolution that has been passed to that effect.

(E) and this resolution be communicated to the Bank and remain in force until a new resolution shall have been passed and a copy thereof submitted to the Bank.

(F) I\*/We\* ..... as Company Secretary of ..... a Company incorporated on ..... and having its registered office at ..... and ..... as Chairman of the meeting of the Board of Directors at which the foregoing resolutions were passed hereby certify the said foregoing resolutions were passed at a meeting of the Directors of the Company duly convened and held at ..... on the ..... day of ..... and that said resolutions were duly passed and are now in full force and effect.

Date .....

Chairman of the Board of Directors' meeting

Company Secretary

.....

.....

I\*/We\* confirm that the above information is true and correct and I\*/We\* agree to be responsible for all transactions through ABC e-Banking. I\*/We\* agree to the Terms and Conditions, a copy of which has been provided to me\*/us\*.

"Read and approved" to be written in signatory's  
handwriting on the below line.

"Read and approved" to be written in signatory's  
handwriting on the below line.

Authorised Signature

Authorised Signature

Name

Name

Title

Title