**COMPLETE ONLINE BANKING APPLICATION FORM**

**Branch:** [ ]  W/F [ ]  Bridge Street [ ]  Gros-Islet [ ]  Soufriere [ ]  Vieux Fort

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| PERSONAL INFORMATION |
| **Customer****Name:** | Click or tap here to enter text. | **Home Phone:** | Click or tap here to enter text. |
| Click or tap here to enter text. | **Work Phone:** | Click or tap here to enter text. |
| **Mailing Address:** | Click or tap here to enter text. | **Mobile Phone:** | Click or tap here to enter text. |
| Click or tap here to enter text. | **E-Mail Address:** | Click or tap here to enter text. |
| Click or tap here to enter text. |
| **Residential Address:** | Click or tap here to enter text. |  |  |
| Click or tap here to enter text. |  |
| Click or tap here to enter text. |  |

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| **Internet Banking Basic Service Options** |
| **Standard Features:** | **Optional Features:** |
| View Account BalancesView and Print Cheque and voucher ImagesSecure E-mail Statements viewing and downloadTransaction viewing and download | Bill PaymentInternal TransfersLoan PaymentsStop PaymentsWire Transfers |

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| GENERAL ACCOUNT ACCESS RIGHTS FOR USER (Login ID is Assigned by Bank)INDIVIDUAL ACCOUNTS |
| **CIF #:** |  |
| **USER ID #:** |  |
| **ACCOUNT****#** | **VIEW ONLY****View balances and statements/cannot****perform any transactions.** | **TRANSFER IN ONLY****Cannot access any account information/****deposit funds only.** | **TRANSFER IN & OUT****Transfer funds in and out.** |
| **1** | Click or tap here to enter text. |  |  |  |
| **2** | Click or tap here to enter text. |  |  |  |
| **3** | Click or tap here to enter text. |  |  |  |
| **4** | Click or tap here to enter text. |  |  |  |
| **5** | Click or tap here to enter text. |  |  |  |
| **6** | Click or tap here to enter text. |  |  |  |
| **7** | Click or tap here to enter text. |  |  |  |
| **8** | Click or tap here to enter text. |  |  |  |
| **9** | Click or tap here to enter text. |  |  |  |
| **10** | Click or tap here to enter text. |  |  |  |
| GENERAL ACCOUNT ACCESS RIGHTS FOR USER (Login ID is Assigned by Bank)JOINT ACCOUNTS |
| **CIF #/s:** |  |
|  **ACCOUNT/s # Access Rights Signing Priviledges** |
| **1** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **2** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **3** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **4** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **5** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **6** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **7** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **8** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **9** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |
| **10** | Click or tap here to enter text. |  | **VIEW** |  | **IN ONLY** |  | **IN & OUT** |  | **Any One** |  | **Any Two**  |  | **Both** |

By signing below, I hereby authorize you and your agents to attach the above Joint Accounts with the stated Access Right to the Complete On-Line Banking Account of the applicant. I hereby certify that all statements relating to the above Joint Accounts are true and complete and are made for the purpose of obtaining the Complete On-Line Banking Service; authorize you to obtain such information as you may require concerning the statements herein; agree that this application shall remain your property; and acknowledge my responsibility to inform you of any change in name and address and account signing Privileges within a reasonable time.

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| JOINT ACCOUNT SIGNATURE: | DATE: Click or tap to enter a date. |

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| JOINT ACCOUNT SIGNATURE: | DATE: Click or tap to enter a date. |

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| JOINT ACCOUNT SIGNATURE: | DATE: Click or tap to enter a date. |

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| JOINT ACCOUNT SIGNATURE: | DATE: Click or tap to enter a date. |

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| **SPECIAL INSTRUCTIONS** |
| Click or tap here to enter text.  |
| REVIEWING MANAGER’S SIGNATURE: | DATE: |

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| BILL PAYMENT DETAILS |
| **UTILITY VENDOR** | **NAME ON ACCOUNT** | **ACCOUNT NUMBER** |
| **Cable & Wireless Fixed Line** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **Cable & Wireless Mobile** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **Cable & Wireless Cable Vision** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **Digicel** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **EC Global** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **WASCO** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **LUCELEC** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **Courts (SLU) Limited** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **4Cs Credit Card** | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |

**Authorization and Agreement**

By signing below, I hereby apply for **Complete On-Line Banking (COB)** service (the "Service") and authorize you and your agents and assigns to provide the Service for the Bank of Saint Lucia Limited (BOSL) (the "Bank") accounts designated. I understand that the use of the Service is subject to the terms and conditions contained in: (a) the Complete On-Line Banking Service Agreement ("the Agreement") which I may access when I log onto the Service, (b) your general disclosure for personal and business accounts which I received when I opened my account(s) and (C) your general account mandates. I acknowledge and agree that using, or permitting another person to use, the Service confirms the terms and conditions set forth in the Agreement.

I must indicate that I wish to cancel the Service by written notice. Non-usage of the Service for **120 days** may result in suspension of the Service. I agree that any time after such notice or period of non-use, you may discontinue the Service. If my Service is discontinued I can request it’s reinstatement by contacting the Bank in writing or via telephone.

I hereby certify that all statements in this application are true and complete and are made for the purpose of obtaining the Service; authorize you to obtain such information as you may require concerning the statements herein; agree that this application shall remain your property; and acknowledge my responsibility to inform you of any change in name and address within a reasonable time.

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| COB APPLICANT’S SIGNATURE: | DATE: | LOADING OFFICER’S SIGNATURE: | DATE: |
| LOADING OFFICER’S NAME: |
| **FOR BANK USE ONLY** |
| ACCOUNT MANDATE REVIEWED AND VERIFIED BY: | NAME: | DATE: |
| SIGNATURE: |
| COB ACCOUNT SETUP REVIEWED BY: | NAME: | DATE: |
| SIGNATURE: |