



ONLINE BANKING APPLICATION FORM

Date:

All information should be typed in CAPS

Section 1: Company Details

Company Name: _____

Address: _____

P.O. Box: _____ Postal Code: _____ City: _____

Phone: _____ Email: _____

Section 2: Bank Accounts (Current/Call/Time Deposit)

Account Number			
1		5	
2		6	
3		7	
4		8	

Section 3: User Setup (If set up is required by bank)

User 1:

Full Name					
Preferred Username	1.	2.	3.		
Email Address					
Mobile Number					
Identification No. (ID/Passport)*					
Identification Expiry Date					
Access Level	<input type="radio"/> Initiator		<input type="radio"/> Authorizer		
User Transaction Limit (If any)	From		To		
Account Number to Access (Choose from section 2)	1. <input type="radio"/>	2. <input type="radio"/>	3. <input type="radio"/>	4. <input type="radio"/>	All <input type="radio"/>
	5. <input type="radio"/>	6. <input type="radio"/>	7. <input type="radio"/>	8. <input type="radio"/>	
User Signature					

*Please provide a copy of your ID/Passport

User 2:

Full Name					
Preferred Username	1.	2.	3.		
Email Address					
Mobile Number					
Identification No. (ID/Passport)*					
Identification Expiry Date					
Access Level	<input type="radio"/> Initiator		<input type="radio"/> Authorizer		
User Transaction Limit (If any)	From		To		
Account Number to Access (Choose from section 2)	1. <input type="radio"/>	2. <input type="radio"/>	3. <input type="radio"/>	4. <input type="radio"/>	All <input type="radio"/>
	5. <input type="radio"/>	6. <input type="radio"/>	7. <input type="radio"/>	8. <input type="radio"/>	
User Signature					

User 3:

Full Name					
Preferred Username	1.	2.	3.		
Email Address					
Mobile Number					
Identification No. (ID/Passport)*					
Identification Expiry Date					
Access Level	<input type="radio"/> Initiator		<input type="radio"/> Authorizer		
User Transaction Limit (If any)	From		To		
Account Number to Access (Choose from section 2)	1. <input type="radio"/>	2. <input type="radio"/>	3. <input type="radio"/>	4. <input type="radio"/>	All <input type="radio"/>
	5. <input type="radio"/>	6. <input type="radio"/>	7. <input type="radio"/>	8. <input type="radio"/>	
User Signature					

User 4:

Full Name					
Preferred Username	1.	2.	3.		
Email Address					
Mobile Number					
Identification No. (ID/Passport)*					
Identification Expiry Date					
Access Level	<input type="radio"/> Initiator		<input type="radio"/> Authorizer		
User Transaction Limit (If any)	From		To		
Account Number to Access (Choose from section 2)	1. <input type="radio"/>	2. <input type="radio"/>	3. <input type="radio"/>	4. <input type="radio"/>	All <input type="radio"/>
	5. <input type="radio"/>	6. <input type="radio"/>	7. <input type="radio"/>	8. <input type="radio"/>	
User Signature					

Signature matrix will be set as per the company board of directors resolution or shareholders resolution

*Please provide a copy of your ID/Passport

We understand and agree with the Bank's terms and conditions for the provisions of Online Banking service, a copy of which was provided with this form.

We represent and warrant the signatory(ies) below is / are duly authorized to enter into this agreement on the Company's behalf. We agree that any of the above provided accounts shall be charged for "applicable charges of online banking" and we hereby authorize the bank to debit our account number _____.

We have read and understand the Tariff of Charges available on <https://www.oib.om> and understand its applicability to our account, subject to written confirmation on any changes.

Authorized signature and company seal

Name

Date:

Authorized signature and company seal

Name

Date:

For Bank Use Only

Received & Signature Verified by	
Signature/Date	
Enrolled by	
Signature/Date	
Approved by	
Signature/Date	
Control Checked by	
Signature/Date	