

NEW APPLICATION     CHANGE REQUEST

<b>CUSTOMER</b>	Date of Request:	_____		
	Business Name:	_____		
	Business Address:	_____		
	Business EIN:	_____	Branch of Account:	_____
	Business Type:	<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Limited Liability Partnership (LLP) <input type="checkbox"/> Municipality	<input type="checkbox"/> Organization/Association <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other	

<b>BUSINESS INTERNET BANKING SERVICES</b>	<p><b>Business Internet Banking includes the following services:</b> Access to accounts, view check and deposit slip images, initiate internal fund transfers, loan payments, and stop payments.</p> <p>Indicate additional services below, if desired. Note that additional documentation may be required and additional fees may apply.</p> <p><b>Bank of Canton requires the use of a security token to access the Business Internet Banking platform.</b></p> <p><input type="checkbox"/> <b>eStatements</b>          View monthly account statements securely via the Business Internet Banking platform. <b>Requires eStatement Agreement and Disclosure.</b></p> <p><input type="checkbox"/> <b>Business Bill Pay</b>          Pay bills online. Set-up payees and vendors, schedule future-dated or recurring payments, include invoice and/or memo information on each 'check' payment, create e-mail reminders, obtain payment history and generate custom summary and/or detail reports. <b>Requires Business Internet Banking Agreement</b></p> <p><input type="checkbox"/> <b>Business Mobile</b>          Securely access and manage business accounts anytime, anywhere. Review balances and activity, view check images, receive alerts, pay bills, originate and approve transactions and transfers. <b>Requires Mobile Banking and Deposit Terms &amp; Conditions.</b></p> <p><input type="checkbox"/> <b>Mobile Deposits</b>          Deposit checks using the Business Mobile App. <b>\$5,000 daily limit applies unless otherwise agreed upon. Requires Mobile Banking and Deposit Terms &amp; Conditions</b></p>
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INTERNAL USE ONLY: Logged In User: \_\_\_\_\_

**Business Internet Banking Application**

**Rev 12/2021**

		IND	Account Number	Account Nickname	Account Type	Access Level*	eStatement Access**	Mobile Deposit	Primary Account***
<b>ACCOUNTS</b>	<input type="checkbox"/> Add <input type="checkbox"/> Delete	1			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	2			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	3			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	4			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	5			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	6			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	7			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	8			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	9			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/> Add <input type="checkbox"/> Delete	10			Choose an item.	Choose an item.	<input type="checkbox"/>		<input type="checkbox"/>

\*Access Level for Primary Account must be set to FULL ACCESS. Internal fund transfers, and stop payments require FULL ACCESS. VIEW & DEPOSIT permits transfers in to the account only. VIEW ONLY does not permit any transfers or stop payments.

\*\* eStatement notifications will be made to the Senior Administrator's email address as indicated below

\*\*\*Unless otherwise indicated, the first account listed above will serve as the Primary Account for this Business Internet Banking profile. This account will be assessed any fees (if applicable) related to internet banking services, unless otherwise indicated under separate agreement.

SENIOR ADMINISTRATOR*	<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Delete		<input type="checkbox"/> Check here if replacing current Senior Administrator If new Senior Administrator is already a user, indicate User ID here:	
	Senior Administrator Name: _____		Title: _____	
	SSN: _____	DOB: _____	Phone: _____	
	Email address: _____		Mother's Maiden Name: _____	
	User ID: _____	Token Type: <input type="checkbox"/> Hard <input type="checkbox"/> Soft		
*Senior Administrator indicated above is the primary user on the online banking system and has rights to all accounts and services indicated on this application. eStatement notifications will be made to the email address indicated for the Senior Administrator.				

USERS	Name	Email Address	SSN (no dashes)	DOB	Phone (no dashes)	User ID	User Level	Accounts to Access*	Transfer Option	Stop Pay Option	Bill Pay Access	Token Option
Add Delete									Choose an item.	Choose an item.	<input type="checkbox"/>	Choose an item.
Add Delete									Choose an item.	Choose an item.	<input type="checkbox"/>	Choose an item.
Add Delete									Choose an item.	Choose an item.	<input type="checkbox"/>	Choose an item.
Add Delete									Choose an item.	Choose an item.	<input type="checkbox"/>	Choose an item.
*Indicate which accounts the user will have access to by inserting the IND number from the Account Section above.												

SIGNATURE	CUSTOMER AUTHORIZATION		
	I, the undersigned, do hereby acknowledge that I am authorized, under the Resolutions currently on file at Bank of Canton, to act on behalf of this company, group, association, or organization. In addition, I acknowledge receipt of and agree to the terms and conditions set forth in the Business Internet Banking Agreement and other pertinent Agreements, Disclosures and/or Terms & Conditions relative to the services selected.		
	<input type="checkbox"/> Received <b>Business Internet Banking Agreement</b> <input type="checkbox"/> Received <b>Bank of Canton eStatement Agreement and Disclosure</b> <input type="checkbox"/> Received <b>Mobile Banking and Deposit Terms and Conditions</b>		
	Authorized Signature: _____	Printed Name: _____	Title: _____ Date: _____

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BRANCH AUTHORIZATION – BANK USE ONLY		
<b>APPROVAL</b>	By signing below, I acknowledge that I have verified that the above signed customer is authorized to act on behalf of this company, group, association, or organization.	
	Authorized Signature:	Printed Name:
		Title:
		Date:

ECOMMERCE DEPARTMENT – BANK USE ONLY		
<b>PROCESSING</b>	Client Number:	Processed by:
		Date Processed:
	<input type="checkbox"/> Client Setup	<input type="checkbox"/> Token(s) Issued
	<input type="checkbox"/> eStatement Setup	<input type="checkbox"/> Welcome Letter Issued
	<input type="checkbox"/> Business Bill Pay Setup	
<input type="checkbox"/> Business Mobile Setup		
<input type="checkbox"/> Mobile Deposit Setup		

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**Rev 12/2021**