

## Commercial Business - Online Banking Request Form

\* = required field

Date\*:  /  /

### Business Information

New  Update

CID:

Mobile Number\*: .....

Company Name\*: .....

Email Address\*: .....

### Account Statements

ADCB will send Monthly Electronic Statement of Accounts in consolidated format via email to the email address specified above.

Business First Package Customer  Yes  No

BUSINESS FIRST PACKAGES (BUNDLED OFFER) (the "Monthly Membership Fee")	Pricing before VAT	VAT	Pricing including VAT
<input type="checkbox"/> Digital Package	AED 150 / month	AED 7.50	AED 157.50 / month
<input type="checkbox"/> Essential Package	AED 275 / month	AED 13.75	AED 288.75 / month
<input type="checkbox"/> Essential Plus Package	AED 375 / month	AED 18.75	AED 393.75 / month
<input type="checkbox"/> Executive Package	AED 800 / month	AED 40.00	AED 840.00 / month
<input type="checkbox"/> Executive Plus Package	AED 1,650 / month	AED 82.50	AED 1,732.50 / month

SmartStart Business Package Customer:  Yes  No

SMARTSTART BUSINESS PACKAGES (BUNDLED OFFER) (the "Monthly Membership Fee")	Pricing before VAT	VAT	Pricing including VAT
<input type="checkbox"/> Essential Package	AED 275 / month	AED 13.75	AED 288.75 / month
<input type="checkbox"/> Essential Plus Package	AED 375 / month	AED 18.75	AED 393.75 / month
<input type="checkbox"/> Executive Package	AED 800 / month	AED 40.00	AED 840.00 / month
<input type="checkbox"/> Executive Plus Package	AED 1,650 / month	AED 82.50	AED 1,732.50 / month

### ACKNOWLEDGEMENT/DECLARATION

I/We agree hereby irrevocably and unconditionally declare that all information provided herein is true and accurate and authorize ADCB to verify all or any of such information, from whatever sources it considers appropriate, and that I/We are aware of, and expressly agree to be bound by the Terms & Conditions for Wholesale Banking Group as available on the ADCB website www.adcb.com, including the Terms and Conditions of the relevant ADCB offering provided under the Business First Package. I/We also agree to this Pricing Acceptance Form and the conditions mentioned on the next page. I/We confirm that my/our signature(s) on this page is to be construed as a confirmation and acceptance of the full content and the conditions of these both forms.

NOTE: One Business First Package will be offered per CID. Customer agrees to a contract period of minimum 12 months. Failure to pay the Monthly Membership Fee may result in the termination of the respective Business First Package, discontinuation of the associated benefits and/or preferential rates on the featured ADCB offering without providing the Customer with any prior written notice. If you Opt Out from Business First Package, you shall return the device and stationery received under respective ADCB offering, in the same condition as provided to you by ADCB. Should you wish to continue with any other ADCB offering after opting out of the Business First Package, standard ADCB Charges shall be applicable for the respective ADCB offering.

### ProCash

Reporting  Transaction Debit Account Number / Currency\*: .....

Require Extended Training:  Yes  No Ministry of Labor (MoL) ID<sup>1</sup>: .....

### User Profile

Sr. No.	User Full Name*	Mobile Number*	Email Address*	Emirates ID Number*	Emirates ID Expiry Date*	Role*						
						Read Only	Maker <sup>2</sup>	Checker <sup>3</sup>	Super User <sup>4</sup>	View Loans & Deposits	Bulk Salary Transfer (CST)	Corporate Debit Card Program Admin
1						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you need to input more users' information please contact your Cash Sales or Relationship Manager.
- All account access is required for availing Consolidated Statement Facility
- The Authorization Limit will be as per the company operating mandate maintained at ADCB. Any deviation will have to be supported by a duly signed document.

1 Ministry of Labor ID is mandatory for Wage Payment System (WPS) access.

2 Maker means the person who is authorised as per this form, to initiate and submit Transaction / request(s) to debit your Account(s) or update your Account(s) with the Bank, including salary transfer.

3 Checker means the person who is authorised as per the Bank's Operating Mandates, to authorise Transaction / request(s) initiated and submitted by the Maker, to debit your Account(s) or update your Account(s) with the Bank, including salary transfer.

4 Super-User means the person who is authorised as per the Banks Operating mandates, to initiate and submit Transaction / request(s) to debit your Account(s) or update your Account(s) with the Bank, including salary transfer and must provide an Emirates ID copy.

<sup>^</sup> Program Admin for Corporate Debit Card - person appointed by the Company to solely manage all transaction related to the Debit Card Control including:

- Allocating cardholder limits, modifying card transaction restrictions, viewing statement; replacement card requests; card cancellation requests, and general Corporate Debit Card maintenance.

All transactions processed by Program Admin for Corporate Debit Card are singly executed.

Program Admin for Corporate Debit Card will be set by default for all Super Users.

Authorised Signature\*: .....

**IVR (Automated Phone Banking)**

I/We wish to register for ADCB's Commercial Banking IVR service.

ADCB will send a One Time Password (OTP) on the registered mobile number. Customers need to call 600 57 6363. using the registered mobile number, use this OTP to complete the IVR registration process and set their Telephone Personal Identification Number (TPIN).

**SMS Banking**

To register for SMS Banking services, please send REG followed by your Account Number to 2626. e.g. REG 123456030001 to 2626.

**I/We understand, agree and undertake that:**

- Users will be responsible for the authenticity, integrity and safety of the data.
- Users will be responsible for backing up their data regularly as Bank will bear no responsibility for safety of data in case of its loss and Users will abstain from loading illegal material or data on the server. Bank will bear no responsibility for legality or authenticity of the data residing on the server.

I/ We confirm that, I/ we have read, understood and agreed that the statements/ advices/ data received through the server are for information purposes and are sent as per the Bank records as of date and that the official statements/ advices relied on by the Bank are the original statement/ advice which is sent by mail to the customer's registered address with the Bank. Furthermore, I/ we acknowledge that the statement/ advices are sent by the Bank at my/ our request and I/ we understand that the use of this service is at my/ our sole risk and I/ we take full responsibility for using this Service. I/ We hereby certify that the information provided in this form is true and correct. I/ We will send the Bank a written notice of any changes as and when they occur to keep the bank records current and updated. I/ We acknowledge that my/ our use of the service(s) indicated above will be governed only by the relevant terms and conditions in the Corporate Internet Banking Services Agreement which this form is part of.

I/We confirm that I/we have printed, read and agreed to the Terms and Conditions found on ADCB online: [www.adcb.com/en/terms-conditions/corporate-investment-banking](http://www.adcb.com/en/terms-conditions/corporate-investment-banking)

**Declaration**

You hereby request those ADCB Offerings and/or modifications set out in this Form. You hereby declare that the information you provide in this Form is complete, true and accurate, and that the request(s) made in this Form have been duly approved and authorized. You authorise and agree to the Bank (and its Affiliates on its behalf) making enquiries and obtaining any credit references, account statements or other relevant information about you from any financial institution, regulatory body, any credit reference agency/bureau (including Al Etihad Credit Bureau and the Central Bank) and/or from any other source that the Bank considers necessary in order to verify the information provided by you and to assess your ability to meet your commitments, without taking your additional consent. You agree to update the information you have provided to the Bank in accordance with Part 1 Clause 3 of the Wholesale Banking Terms and Conditions. You acknowledge and agree that the Bank reserves the right to reject the request(s) made in this Form in its absolute discretion and is not required to provide reasons for such rejection.

.....  
**Authorised Signature\***

**Name and Title\*:** .....

**Date\***   /   /

.....  
**Authorised Signature\***

**Name and Title\*:** .....

**Date\***   /   /

**For Bank Use Only**

I hereby confirm that the PROCASH |  set-up for the above request was completed.

Processed by ..... Signature ..... Date   /   /

Authorised by ..... Signature ..... Date   /   /

I hereby confirm that the form was signed in my presence.

Relationship Manager\* : ..... Profit Center Code\* : .....

Package\* : ..... Additional Remarks : .....

Signature\* : ..... Date\* :   /   /