



## Authorisation

We, the Customer, wish to amend the details of our previously signed Application for iBusiness Banking. We acknowledge that this document is subject to the Terms and Conditions of the iBusiness Banking Agreement.

Signed on behalf of the Company noted above in accordance with our existing resolution for iBusiness Banking.

AUTHORISED SIGNATORY 1				AUTHORISED SIGNATORY 2			
<input type="text"/>				<input type="text"/>			
Date	Day	Month	Year	Date	Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Checklist

- Only one box should be marked in each section
- Please ensure that the correct signatories have signed this Amendment Request
- Once completed please forward this Amendment Request to your branch/ Relationship Manager

## What Happens Next?

- Your Local Administrator can monitor iBB to verify that the amendment has been processed
- If you wish to query the status of your request you can contact the iBusiness Banking Operations Team on 0818 72 00 00 or +353 1 641 4889 (Outside Rol) Monday - Friday 08:30 - 17:30

**We will be unable to process your request unless it is branded and signed by your branch/Relationship Manager**

## FOR BANK USE ONLY

**ATTENTION!** The ORIGINAL form must be kept in branch and a COPY should be FAXED to iBusiness Banking Operations for processing. Fax No: (01) 6089454.

I confirm that the customer signature(s) have been verified

Authorised Signatory at Branch	SIGNATURE
PRINT NAME	<input type="text"/>
<input type="text"/>	
SIGNING NUMBER	DATE
<input type="text"/>	Day Month Year
CONTACT NUMBER	<input type="text"/>
<input type="text"/>	



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