



Add Accounts to iBusiness Banking (iBB)

How to complete the form

1 Please use a **BLACK** pen

2 Mark boxes like this
 If you make a mistake, do this
 and mark the correct box

3 Please use **BLOCK CAPITAL**
 LETTERS and leave one
 space between each word

Company Name

An Existing User ID

Please register the following Business Accounts on iBusiness Banking (iBB)

Branch Accounts

Account Name	NSC	Account Number
<input type="text"/>	9 3 <input type="text"/>	<input type="text"/>
<input type="text"/>	9 3 <input type="text"/>	<input type="text"/>
<input type="text"/>	9 3 <input type="text"/>	<input type="text"/>
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<input type="text"/>	9 3 <input type="text"/>	<input type="text"/>
<input type="text"/>	9 3 <input type="text"/>	<input type="text"/>

Currency Accounts (NSC 93-00-67 or 23-85-90)

Account Name	Currency	NSC	Account Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Credit Card Accounts

Billing Name	Credit Card Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Finance & Leasing Accounts

Account Name	Account Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

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 <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>

Checklist

- 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	
PRINT NAME	SIGNATURE
<input type="text"/>	<input type="text"/>
SIGNING NUMBER	DATE
<input type="text"/>	Day Month Year
CONTACT NUMBER	<input type="text"/> / <input type="text"/> / <input type="text"/>
<input type="text"/>	



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