

Application Form for Corporate Internet Banking Services

Please note - All fields in this form are mandatory .Mention customer id only if you are an existing customer, otherwise customer id will be generated by the Bank.

 Cust Id*:

 Date:
A: Company Particulars

Company Name _____

Company Registration Number _____

Contact Person (Name as in NRIC/Passport) (Dr / Mdm / Mr / Mrs / Ms) _____

 Phone Number _____ Email Address

 Corporate ID Fax Number _____

B: Accounts to be linked

Only the following Accounts held by your company can be linked

 Account Number

 Account Number

 Account Number

 Account Number

 Account Number

 Account Number

 Account Number

 Account Number

All correspondences relating to your application and usage of ICICI Bank Corporate Internet Banking Service will be sent to the mailing address for this account.

 We wish to avail 1. CIB view Access Yes No

 2. CIB Transaction Access Yes No

(If Yes following access to be enabled)

 Fund Transfer Trade Online Business Fx*

For Business fx only – Primary purpose of Fx transfers- _____

• List of countries for Fx transfer _____

 • Expected currency of Fx transfer SGD USD EUR GBP INR
 Other currency (please specify) _____

(#Transaction access should be supported by Board resolution indicating limits for transactions for each user, maximum permissible limit is specified as below

• Transaction limit will be USD 100,000 • Daily transaction limit USD 250,000)

C: Appointment of Customer Users (For particulars of more than 4 users, please provide details as per Annexure -1)
Customer User 1 Mr Ms Dr Mdm Mrs

Name as in NRIC /Passport: _____

 ID document type: NRIC FIN Passport

 NRIC/FIN/Passport Number

Mobile phone number: _____ Email address: _____

(With country code e.g + 65 for Singapore)

Residential Address	Communication Address

Department: _____ Designation: _____

 Type of Access View Transaction

 For transaction Access enable the following Fund Transfer Trade Online Business Fx

 Customer User ID:

Signature of User 1 _____

Application Form for Corporate Internet Banking Services
Customer User 2 Mr Ms Dr Mdm Mrs

Name as in NRIC /Passport: _____

 ID document type: NRIC FIN Passport

 NRIC/FIN/Passport Number

Mobile phone number: _____ Email address: _____

(With country code e.g + 65 for Singapore)

Residential Address	Communication Address

Department: _____ Designation: _____

 Type of Access View Transaction

 For transaction Access enable the following Fund Transfer Trade Online Business Fx

 Customer User ID:

Signature of User 2 _____

Customer User 3 Mr Ms Dr Mdm Mrs

Name as in NRIC /Passport: _____

 ID document type: NRIC FIN Passport

 NRIC/FIN/Passport Number

Mobile phone number: _____ Email address: _____

(With country code e.g + 65 for Singapore)

Residential Address	Communication Address

Department: _____ Designation: _____

 Type of Access View Transaction

 For transaction Access enable the following Fund Transfer Trade Online Business Fx

 Customer User ID:

Signature of User 3 _____

D. Mode of Operation (to be filled only if any of the User(s) have been given transaction rights, otherwise please strike off)

 Mode of operation: Singly Jointly

Below table to be filled only when joint mode of operation is selected

	Name of user	Name of user	Name of user
Name of User initiating the transaction			
Name of User authorised to approve transactions initiated by the corresponding User mentioned in the same column			

- The work flow rules would be common for all transaction types
- The Approver mentioned should be a registered CIB User
- For any other mode of operation, please check with your relationship manager and kindly provide a separate annexure

E. Transaction Alert: Pls indicate the mobile number of one of the authorised corporate users for the purpose of receiving transaction alerts

Mobile Number (Pls mention along with country code): _____
(Please note that if the mobile number provided here does not match with the mobile number provided for any of the authorised CIB users then application will not be processed.)

F. Declaration by Applicant

1. By signing this application form, I/we hereby agree, confirm and undertake that I/we:
 - Apply for ICICI Bank, Singapore Branch's (the "Bank's") Corporate Internet Banking Service (the "CIB Services").
 - Confirm that by signing this application form, I/we hereby authorize the Bank to enable the CIB Services for my/our mentioned Cust ID.
 - Affirm, confirm and undertake that I/we have been provided with the copies of the Terms and Conditions for the Corporate Internet Banking Services (the Internet Banking Terms ") and the General Terms and Conditions Governing Accounts and Secured Facilities (the "GTC") ,as made available to me/us and as readily available and updated from time to time on the website of the Bank at www.icicibank.com.sg and further agree, confirm that I/we have read and understood each of the aforementioned terms and conditions and agree to be bound by each of them. I/We will adhere to all of the aforementioned terms and conditions for the usage of the CIB Service as these may be amended and prevailing from time to time.
 - Confirm and agree that any existing mandate and/or instructions which I/we may have provided to the Bank will not apply in relation to my/our utilization of the CIB Services.
 - Authorize the Bank to issue Password(s)/Device(s)/and PIN(s) to the authorized Customer User(s) where applicable.
 - Declare that all the particulars and information given in this application form are correct, true, up-to-date and complete in all respects and I/ We have not withheld any information and the Bank is authorized to communicate and exchange such information with whatever sources and/or persons it may consider appropriate for the purpose of verifying the same.
 - Declare, confirm and agree that I/we have had no insolvency proceedings initiated against me/us nor have I/we ever been adjudicated insolvent.
 - Agree and undertake to provide any further information that the Bank or its related companies may require.
 - Agree and understand that the Bank reserves the right to reject any application without providing any reason whatsoever
 - Specifically agree and confirm that the Bank shall be entitled to disclose my/our information in relation to the CIB services in accordance with the relevant clause of the Internet banking terms and conditions and clause 24 (Collection ,Use, Disclosure and Processing of Data of the GTC respectively.
 - Authorize the Bank to debit all applicable subscription and Device fees and other related charges as applicable as may be amended from time to time, including any administration and service charges relating to my/our application and/or use of the CIB services from any of the accounts described in section B of this application from.
2. Enclosed is a certified true copy of our Company's Board Resolution.
3. I/we confirm that the information provided above is true .I/we acknowledge that I/we have received, reviewed and understood the terms and conditions for Business Fx transactions as made available on the website and agreed by me/us together with this form. I/we acknowledge that the charges for each FX transfer not involving a currency conversion may differ from transactions involving a currency conversion. Currency conversion transactions will entail additional currency conversion fee and applicable taxes.
4. I/We hereby agree that the information provided by me/ us herein be updated against my/ our previous records maintained with ICICI Bank and I/ we hereby authorise ICICI Bank to rely on this form and update my/ our information.

Authorised Personnel's Signature/ Name & Designation_____
Authorized Personnel's Signature/ Name and Designation_____
Date

Upon receipt of your fully-completed application form for the CIB Services and if the same is accepted, the Bank will mail the Password/Token to you, as applicable. If you have any queries, please check with the Bank's Customer Service Officer/RM.

FOR BANK USE ONLY

Employee No	RM Name		
		Signature:	
		Date	
Scrutinizer Marker	Scrutinizer Checker	Finacle Maker:	Finacle Checker

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Annexure 1: Particulars of Additional Customer Users
Customer User 4 Mr Ms Dr Mdm Mrs

Name as in NRIC /Passport: _____

 ID document type: NRIC FIN Passport

 NRIC/FIN/Passport Number

Mobile phone number: _____ Email address: _____

(With country code e.g + 65 for Singapore)

Residential Address	Communication Address

Department: _____ Designation: _____

 Type of Access View Transaction

 For transaction Access enable the following Fund Transfer Trade Online Business Fx

 Customer User ID:

Signature of User 4 _____

Customer User 5 Mr Ms Dr Mdm Mrs

Name as in NRIC /Passport: _____

 ID document type: NRIC FIN Passport

 NRIC/FIN/Passport Number

Mobile phone number: _____ Email address: _____

(With country code e.g + 65 for Singapore)

Residential Address	Communication Address

Department: _____ Designation: _____

 Type of Access View Transaction

 For transaction Access enable the following Fund Transfer Trade Online Business Fx

 Customer User ID:

Signature of User 5 _____