

## **Business Banking Online Amendment Application**

BANK OF MELBOURNE BRANCH USE ONLY	CUSTOMER CHECKLIST		
Date Received / /	What to do:		
Staff must complete this section prior to lodgement to	Complete any section that applies to the change(s) you require		
BBO Administration.	Signatories from the Primary Company who have originally		
Primary Company Name	registered for Business Banking Online must sign the Signing Clause (section 7).		
(Verify that section 1 of application matches GHS/CHS)	<ul> <li>Lodge with your relationship manager, or drop into your nearest branch</li> </ul>		
Primary Company CIS	• For assistance, contact our helpdesk on 1300 608 266.		
(check GHS/CHS)	Only complete the section(s) that are relevant to the addition or		
Signatories in the Primary Company Signing Clause have been verified Yes (section 5 of application)	amendment you are making. You may fax this completed form directly to the administration team for processing on (03) 9982 4183.		
Receiving Branch/Dept (Mandatory)	BEGIN APPLICATION		
	1. PRIMARY COMPANY DETAILS		
Staff name (who has verified this application)	Name of company, partnership or sole trader		
(Please print)	ABN/ACN CIS (Bankuse only)		
Employee Number	ADIV/ACIV CIS <b>DAIR USE OTTE)</b>		
RM name/Branch Manager name (Mandatory)	2. FEES AND CHARGES BILLING		
(Please print)	Please indicate the fee account(s) you would like to amend		
RO Code/Branch Manager Number	Business Banking Online monthly access fee		
	Other transaction or service fees incurred through using Business Banking Online		
Fax completed application to:			
BBO Administration on (03) 9982 4183.	Please nominate the account that you would like this fee charged to:		
Retain original form in branch.	BSB number		
BranchStamp	Account number		
	OR		
	Charge account on which the transaction occurred		

## 3. ACCOUNT DETAILS

Complete this section to add, remove or amend the number of users required to authorise payments across one or all companies already registered to Business Banking Online.

Add or Remove the Account	Account Name	BSB	Account Number	One to sign (any)	One to sign (A level user only) OR two to sign (any level user) accepted#	Two to sign (any)	Two to sign (A level user required)*
Add Remove							
Add Remove							
Add Remove							
Add Remove							
Add Remove							
Add Remove							
Add Remove							
Add Remove							
Add Remove							
Add Remove							
Add Remove							
Add Remove							
If you select this option it means either one level "A" User or any two Users of either level "A" and/or level "B" as appointed by you can authorise a transaction.  If you select this option it means either two level "A" Users or one level "A" User and one level "B" User appointed by you can authorise a transaction.							

## 4. TELEGRAPHIC TRANSFER (TT) ACCESS

Complete this section to add or remove telegraphic transfer (TT) access

Company Name	TT Access	CIS (Bank Use Only)
	Add Remove	

5. COMPANY ADMINISTRATOR - METHOD OF OPE	'R ATION		
Complete this section to change your Company Administrator me	=		
If you appoint more than one Company Administrator, how will the	ey operate?		
Independently Jointly			
6. COMPANY ADMINISTRATOR - CHANGE LEVEL	OF ACCESS		
Complete this section to change the level of access of your Compar	ny Administrator.		
$\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$	irely from BBO)	User ID	
$\begin{tabular}{ll} \hline & Add Company Administrator (increase the access of an existing the expression of the expression$	ng Authorise User only)	User ID	
Amend the access of an existing Company Administrator			
Authorise	] View (will revoke Authentic	cation Device)	
Create (will revoke Authentication Device)			
User ID			
7. PRIMARY COMPANY SIGNING CLAUSE			
This section must be completed by the appropriate Signatories of the	Primary Company. Authorised	Signing Representati	ves can only sign if they
have been previously nominated by the Primary Company on the Bu	siness Banking Online Applicati	on form.	5 0 , 5
Authorised Signing Representatives			
Name of Director/Company Secretary/Authorised Signing Rep.1	Name of Director/Compa	any Secretary/Auth	orised Signing Rep. 2
Signature Date	Signature		Date
<b>Y</b>	<b>Y</b>		
	<b>─</b>   <b>/^</b>		