



## Business Internet Banking Application Enrollment Form

### Customer Information

Business Name: \_\_\_\_\_  New Enrollment  Update Existing

TIN/EIN# \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Physical Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Account Signer: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

### Account Information

| Account # | Account Title / Description | Account Type<br><small>(Checking, Savings, CD, Loan)</small> | Add/Delete |
|-----------|-----------------------------|--|------------|
|           |                             |  |            |
|           |                             |  |            |
|           |                             |  |            |
|           |                             |  |            |
|           |                             |  |            |
|           |                             |  |            |
|           |                             |  |            |
|           |                             |  |            |

By signing below, I authorize Citizens Bank to provide access to Citizens Bank Internet banking for the accounts listed above.

| Authorized Signers | Date | Authorized Signers | Date |
|--------------------|------|--------------------|------|
|                    |      |                    |      |
|                    |      |                    |      |