



Company: _____

Contact Name: _____

Job Title: _____ **Email:** _____

Address: _____

Mailing: _____

Telephone:

Business: _____

Home: _____

Cellular: _____

Pager: _____

Fax: _____

Printed Name: _____

Customer Signature: _____ **Dated:** __/__/__(dd/mm/yy)

Printed Name: _____

Customer Signature: _____ **Dated:** __/__/__(dd/mm/yy)

BANK USE ONLY

Approved By: Name: _____ Signature: _____ Dated __/__/__ (dd/mm/yy)

Checked by: Name: _____ Signature: _____ Dated __/__/__ dd/mm/yy



Company Name:

User Login ID																				(6-12 Characters)
User First Name																				
User Last Name																				
Job Title																				

User Login ID																				(6-12 Characters)
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User Last Name																				
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Job Title																				

Printed Name: _____ Customer Signature: _____ Dated: __/__/__(dd/mm/yy)

Printed Name: _____ Customer Signature: _____ Dated: __/__/__(dd/mm/yy)

BANK USE ONLY

Approved by Name: _____ Signature: _____ Dated: __/__/__(dd/mm/yy)
Checked by Name: _____ Signature: _____ Dated: __/__/__(dd/mm/yy)

(This form may be copied and used as many times as required.)



Company Name:															
User Login ID															(6-12 Characters Alphanumeric)
User Name															

ENTER THE DESIRED ACCOUNT NUMBER AND SELECT THE ACCESS RIGHTS FOR THE ABOVE USER.

Account # :														
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Balance & Statement	<input type="checkbox"/> View			
Transfers	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Drafts	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Wire Transfer	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Third Party & Bulk Payment	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Bill Payment	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Order Cheques	<input type="checkbox"/> Create			

Account # :														
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Balance & Statement	<input type="checkbox"/> View			
Transfers	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Drafts	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Wire Transfer	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Third Party & Bulk Payment	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Bill Payment	<input type="checkbox"/> Create	<input type="checkbox"/> Authorize	Limit \$	_____
Order Cheques	<input type="checkbox"/> Allow			

Printed Name: _____ Customer Signature: _____ Dated: __/__/__ (dd/mm/yy)

Printed Name: _____ Customer Signature: _____ Dated: __/__/__ (dd/mm/yy)

BANK USE ONLY

Approved By: Name: _____	Signature: _____	Dated: __/__/__ (dd/mm/yy)
Checked By: Name: _____	Signature: _____	Dated: __/__/__ (dd/mm/yy)

(This form may be copied and used as many times as required.)



Company Name:

Allow EDI (Electronic Data Interchange) File Transmission?

- Yes No

Select file format:

- Ach Non-ACH (flat file)

Permit the following Users to initiate transfers on the behalf of the organization.

User Login ID	<input style="width: 100%;" type="text"/>
User Name	<input style="width: 100%;" type="text"/>

User Login ID	<input style="width: 100%;" type="text"/>
User Name	<input style="width: 100%;" type="text"/>

User Login ID	<input style="width: 100%;" type="text"/>
User Name	<input style="width: 100%;" type="text"/>

EDI related fees/charges will be deducted from the account below.

Account Number	Account Name
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

EDI Contact Information

Name: _____

Telephone: _____ **Fax:** _____

Please note: The file extension must be “**dat**,” “**.ach**” or “**.txt**” and the size should not exceed **300k**.

Printed Name: _____ Customer Signature: _____ Dated __/__/__ (dd/mm/yy)

Printed Name: _____ Customer Signature: _____ Dated: __/__/__ (dd/mm/yy)

BANK USE ONLY

Approved By: Name: _____	Signature: _____	Dated __/__/__ (dd/mm/yy)
Checked by: Name: _____	Signature: _____	Dated __/__/__ (dd/mm/yy)

(This form may be copied and used as many times as required.)

Company Name: _____

Only the following Butterfield account types should be entered below:

Checking, Savings, Term Deposits (Call & Fixed) and Loans.

By entering the number(s) below, you authorize Butterfield Bank (Barbados) Limited to provide online access to the noted account(s).

Account Number(s)	Account Name

Printed Name: _____ Customer Signature: _____ Dated: __/__/__(dd/mm/yy)

Printed Name: _____ Customer Signature: _____ Dated: __/__/__(dd/mm/yy)

BANK USE ONLY

Approved by Name: _____ Signature: _____ Dated __/__/__(dd/mm/yy)

Checked by Name: _____ Signature: _____ Dated __/__/__(dd/mm/yy)