

Triodos Bank. Business Banking Internet Banking application form.

This form enables you to request Internet Banking access for existing account operators and authorised enquirers only.

Please complete the Change of Account Operator form if you wish to add or remove account operators.

Please complete all of the following sections

Your organisation

Official name of your organisation/business (as shown on any official documents where applicable)

Triodos Bank account number(s) you want to add Internet Banking to:

<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"/>	<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"/>

Internet Banking rights

This section allows you to request Internet Banking for existing account operators and authorised enquirers. You can specify who can set up and/or authorise withdrawals online.

Internet Banking access is provided by means of an individual security device known as a Digipass. If you are an existing customer already using a Digipass to access your other account(s), please provide the existing Digipass number in the relevant box.

If you wish to add internet banking access for more than four existing account operators and authorised enquirers, please copy the following section and include with the form.

Any details provided in this section will replace the information we already hold on record.

Account operator / authorised enquirer 1

Title Mr / Mrs / Ms / Miss / Dr / Other

First name(s)

(For identification purposes, please use your full name and not a nickname)

Surname

Residential address

Postcode

Email*

(it will not be possible to set up internet banking without this information)

If you are an existing authorised enquirer, you will only be given viewing rights in internet banking. If you are an existing account operator, please complete the settings below.

Should this person be able to set up payments in internet banking (account operators only)?

Yes No

Should this person be able to authorise payments in internet banking (account operators only)?

Yes No

If yes, maximum payment the account operator can authorise through

Internet Banking £

Existing Digipass number (if applicable)

Declaration

I confirm that the information provided on this form is true to the best of my knowledge and I acknowledge Triodos Bank's right to make any enquiries that you consider necessary to confirm the details on this form.

Signature of the above named

Date

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Account operator / authorised enquirer 2

Title Mr / Mrs / Ms / Miss / Dr / Other

First name(s)

(For identification purposes, please use your full name and not a nickname)

Surname

Residential address

Postcode

Email*

(it will not be possible to set up internet banking without this information)

If you are an existing authorised enquirer, you will only be given viewing rights in internet banking. If you are an existing account operator, please complete the settings below.

Should this person be able to set up payments in internet banking (account operators only)?

Yes No

Should this person be able to authorise payments in internet banking (account operators only)?

Yes No

If yes, maximum payment the account operator can authorise through

Internet Banking £

Existing Digipass number (if applicable)

Declaration

I confirm that the information provided on this form is true to the best of my knowledge and I acknowledge Triodos Bank's right to make any enquiries that you consider necessary to confirm the details on this form.

Signature of the above named

Date

/ /

Account operator / authorised enquirer 3

Title Mr / Mrs / Ms / Miss / Dr / Other

First name(s)

(For identification purposes, please use your full name and not a nickname)

Surname

Residential address

Postcode

Email*

(it will not be possible to set up internet banking without this information)

If you are an existing authorised enquirer, you will only be given viewing rights in internet banking. If you are an existing account operator, please complete the settings below.

Should this person be able to set up payments in internet banking (account operators only)?

Yes No

Should this person be able to authorise payments in internet banking (account operators only)?

Yes No

If yes, maximum payment the account operator can authorise through

Internet Banking £

Existing Digipass number (if applicable)

Declaration

I confirm that the information provided on this form is true to the best of my knowledge and I acknowledge Triodos Bank's right to make any enquiries that you consider necessary to confirm the details on this form.

Signature of the above named

Date

/ /

Account operator / authorised enquirer 4

Title Mr / Mrs / Ms / Miss / Dr / Other

First name(s)

(For identification purposes, please use your full name and not a nickname)

Surname

Residential address

Postcode

Email*

(it will not be possible to set up internet banking without this information)

If you are an existing authorised enquirer, you will only be given viewing rights in internet banking. If you are an existing account operator, please complete the settings below.

Should this person be able to set up payments in internet banking (account operators only)?

Yes No

Should this person be able to authorise payments in internet banking (account operators only)?

Yes No

If yes, maximum payment the account operator can authorise through

Internet Banking £

Existing Digipass number (if applicable)

Declaration

I confirm that the information provided on this form is true to the best of my knowledge and I acknowledge Triodos Bank's right to make any enquiries that you consider necessary to confirm the details on this form.

Signature of the above named

Date

/ /

Internet Banking settings

To enable you to make transactions which suit your organisation's needs you can complete the following details. Payments input above these amounts will not be accepted.

If you have a Fixed Term Deposit you will be able to view the account through Internet Banking, but not perform transactions.

Payment requests above the amounts set out below will not be accepted. If you do not already have Internet Banking limits in place and you leave this section blank or enter a zero in any of the boxes you will not be able to make payments from your account.

For existing customers with Internet Banking limits in place, please only complete this section if you wish to change your limits.

Transaction Limit - £ the maximum amount you are able to transfer in any one transaction (this should be less than or equal to your maximum daily limit)

Daily Limit - £ the maximum total amount that can be authorised through Internet Banking in one day

Group Limit - Payments above £ will require authorisation as separate items, unless a transaction has previously been made to that account (these can be up to your maximum daily limit)

Only complete this section if you need specific authorisation instructions in addition to the above authorisation instructions.

Payments more than £ require authorisation by:

2. 3. 4. account operators

or

Payments more than £ require authorisation by:

a) named account operator

b) or, either named account operators

or

or, both named account operators

and

Declaration

Please add Internet Banking as detailed in this application form.

Please sign this form in line with your current mandate.

Account Operator name

Signature

Date

Account Operator name

Signature

Date

Account Operator name

Signature

Date

Account Operator name

Signature

Date

Once completed please send this form to our freepost address (no stamp required):

Freepost TRIODOS BANK

For bank use only

Date stamp

Telephone: 0330 355 0355
www.triodos.co.uk

Calls to and from Triodos Bank may be recorded for training and monitoring purposes.

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