



Online Banking Authorization letter

Company Name or Joint account holders' names

Account numbers:

- 1. _____
- 2. _____
- 3. _____
- 4. _____

We hereby authorize the following officer to access the above-mentioned accounts through the Orco Bank Online.

Name officer:

Title:

The officer is entitled to the following functions:

X	Balance Inquiry			
	Monetary transactions		Single validation	Dual validation
	Bill payment		Single validation	Dual validation
	Stop payment		Single Validation	Dual validation

The company hereby declares that it has read and accepts the policies and terms and conditions of the Orco Bank Online, as amended from time to time.

Upon signing this agreement the company hereby indemnifies and hold Orco Bank N.V., its directors, shareholders and related companies or persons harmless from any potential claim from the company, or any other affiliated or related company, regarding the use of the facility.

Name of signing authority

Signature

Name of signing authority

Signature

Please forward this form after signing back to customer.support@orcobank.com or fax to 00-5999-7376741.