



COMPANY INFORMATION

Company Name: _____ Company ID: _____ Date: _____

ACCOUNT INFORMATION

Modification: Add Account Additional Service Remove Service Delete Account

Secondary Company Name*: _____ CIF Number: _____

**Only required if different from the BBO Treasury package name.*

1ST SOURCE ACCOUNT PERMISSIONS

Account Number	Type	Account Nickname	Balance Reporting	Account Transfer	Loan Payments [†]	Bill Payment	Stop Payments	ACH	Wires	FRAUD CONTROL				Short Name (11 Characters)
										Positive Pay	ACH Filter	ACH Block	Check Watch	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

†Enables Special Access Bundle and Account Transfer.

BANK REPORTS ACTIVATION

Account Statement	Business Analysis	Incoming ACH by Company	Incoming ACH by Account	Returns and Corrections	ACH Block Returns	Certificate of Deposit	Dealer Statements
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POSITIVE PAY FEATURES

Stale Date (days)	Auto-Void Stale Dated Checks	Items & Balance Verification

COMPLETE ONLY IF NEW ORIGINATOR NAME OR CHARGEBACK ACCOUNT DESIRED

Sending Company ID (10 Character Max)	ACH Originator Name (16 Character Max)	Chargeback Account	Same Day ACH

USER ACCESS RIGHTS

Grant to All Users with Current Permissions <i>(New services require Attachment A)</i>	Specific Users Only (List below)		

SIGNATURE

Signature: _____ Printed Name: _____

SPECIAL ACCESS

Change Special Access:

NOTES

INTERNAL USE

Tax ID: _____
 Prepared By: _____
 Prepared Date: _____
 Completed By: _____
 Completed Date: _____