

(Applicable for Account of Individual / Joint / Proprietorship Concern)
Branch Name:.....

Preferable Internet Banking User ID:

 Tick for NRB Customer

Customer Information	Please fill up the following information correctly		
Account Type	<input type="checkbox"/> Individual Account	<input type="checkbox"/> Joint Account	<input type="checkbox"/> Proprietorship Account
Account Title			
Master Account Number	<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"/>	
	└ Branch Code ┘	└ Account Number ┘	
Email Address			
Mobile Number	0	1	<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"/>

• SEBL internet banking service will be linked to all accounts under Customer ID or Group ID of the Master Account Number

Services to be availed:

View only Services			
<input checked="" type="checkbox"/> A/C Balance Inquiry	<input checked="" type="checkbox"/> A/C Information View	<input checked="" type="checkbox"/> A/C Statement View and Download	<input checked="" type="checkbox"/> Portfolio Report

Fund Transfer			
<input type="checkbox"/> Within Own Accounts	<input type="checkbox"/> To Other Account of SEBL	<input type="checkbox"/> To Other Bank Account [EFT]	<input type="checkbox"/> RTGS

Utility Bill Payment									
Electricity Bill:	<input type="checkbox"/> DPDC	<input type="checkbox"/> DESCO	<input type="checkbox"/> PDB	<input type="checkbox"/> WZPDCL	Gas Bill:	<input type="checkbox"/> BGDCL	<input type="checkbox"/> TITAS	<input type="checkbox"/> Jalalabad	<input type="checkbox"/> KDGCL
<input type="checkbox"/> Dhaka WASA Bill	<input type="checkbox"/> Telephone Bill (BTCL)		<input type="checkbox"/> Internet Bill (DOZE)						
<input type="checkbox"/> Others (please specify):					(Please enclose utility bill copy for registration)				

<input type="checkbox"/> Mobile Airtime Recharge (Prepaid and Postpaid Mobile of Any Operator)

<input type="checkbox"/> SEBL Credit Card Bill Payment (Local Currency)																			
Credit Card Number	<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"/>

Student Tuition Fees Payment			
<input type="checkbox"/> North South University	<input type="checkbox"/> BRAC University	<input type="checkbox"/> University of Asia Pacific	<input type="checkbox"/> Others (please specify):

*Gray marked services will be available soon.

Account Opening:	<input type="checkbox"/> FDR Account	<input type="checkbox"/> Scheme Account
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<input type="checkbox"/> Standing Order Instruction Setting
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Maximum Amount per Transaction:	<input type="text"/>	No. of Transactions per Day:	<input type="text"/>
Total Transaction Amount per Day:	<input type="text"/>	(Amount must be ≤ 5 lac)	

Two Factor Authentication (2FA) [Must for above Transactional Services]

<input type="checkbox"/> Software Token	<input type="checkbox"/> Android Phone	<input type="checkbox"/> i-phone	<input type="checkbox"/> Windows Phone	<input type="checkbox"/> PC/Laptop
<input type="checkbox"/> Hardware Token (Additional Charge for Hardware Token: Tk. 500/-)		<input type="checkbox"/> RBA (Risk Based Authentication)		

Annual Maintenance Fee: Tk. 200/- plus 15% VAT.

(Applicable for Account of Individual / Joint / Proprietorship Concern)

I/We confirm that the above information is true and complete. I/We also agree the use of Internet Banking shall be governed by Terms and Conditions maintained in the Bank's website https://ibanking.southeastbank.com.bd/ibankUltimus/IBU_USER_DOC/TermsAndConditions.pdf and/or in the registration form. I/We understand the security concerns of E-banking and ensure that I/We will always **keep the user id and password secured & confidential**. I/We know about operation of Internet Banking services of the Bank. I/We agree that Bank will not be liable for any unauthorized access/transaction by using the secret password. I/We authorize the Bank to debit my/our account for applicable charges against availing transactional services to SEBL internet banking.

 Signature of the applicant Date.....

[In case of Joint Account, Annexure-1 needs to be filled up]

For Branch Use Only:

Internet Banking facility **shall not be allowed** to the customer whose KYC formalities are incomplete.

IB User ID Customer / Group ID:Date.....

Operation	Name of Officer	Designation	Signature
Information and Customer Signature verified by			
User ID created by			
User ID verified by			

Approved By:

 Authorized Signature
 P.A. No:.....

 Authorized Signature
 P.A. No:.....

ADC, Head Office (HO) Use Only:

Authorizer 1: Applicant's signature verified, User ID authorized and User Role assigned by

Name:Designation:

Signature.....Date.....

Authorizer 2: User Role authorized and 2FA assigned by

Name:Designation:

Signature.....Date.....

(Applicable for Corporate Account other than proprietorship concern)
Branch Name:.....

Account Information	Please fill up the following information correctly			
Account Title				
Account Number	┌	└	┌	
	└	┌	└	
	Branch Code		Account Number	

Internet Banking will be applicable for:

-
- Above Account only /
-
- All Accounts of the Company (If signatories of all accounts are same)

Services to be availed:

-
- View only Services

Transactional Related Services:

-
- Fund Transfer
-
-
- Utility Bill Payment
-
-
- L/C Open Request (for valued corporate clients only)

Transaction limit setup:

 Maximum Amount per Transaction: No. of Transactions per Day:

 Total Transaction Amount per Day: * (Amount must be ≤ 5 lac)

Two Factor Authentication (2FA) [Must for above Transactional Services]:

<input type="checkbox"/> Software Token	<input type="checkbox"/> Android Phone / <input type="checkbox"/> i-phone / <input type="checkbox"/> Windows Phone / <input type="checkbox"/> PC or Laptop
<input type="checkbox"/> Hardware Token (Additional Charge for Hardware Token: Tk. 500/-)	

Annual Maintenance Fee: Tk. 500/- plus 15% VAT (For transaction related services only).
No. of signatories' involvement (in each transaction): (No. must be ≥ the no. of operators of the account)

For Branch Use Only:

 Internet Banking facility **shall not be allowed** to the customer whose KYC formalities are incomplete. For corporate account, the signatory (s) must be authorized duly.

Customer ID: Date:

Operation	Name of Officer	Designation	Signature
Information and Customer Signature verified by			

Approved By:

 Authorized Signature
 P.A. No:

 Authorized Signature
 P.A. No:

ANNEXURE -1
(To be filled in by joint Account Holders)

Account Title														
Joint Account No														
	└─ Branch Code ─┘				└─ Account Number ─┘									

I/we (Full name)
 hereby authorize Mr. / Mrs. / Ms.
 to facilitate internet banking service for the above account.

I/We confirm that I/we have read and understood the terms and conditions governing SEBL Internet Banking Service and agree to comply with the same.

- I/We authorize my/our co-account holder for inquiry, instruction and generation of reports in the said accounts through Internet Banking Service.
- I/We authorize my/our co-account holder for any kind of transaction (Utility Bill Payment, Fund Transfer, Credit Card Payment etc.) through Internet Banking Service.

My/Our co-account holder and I/we will be solely responsible for the instructions/transactions in the said account(s). I/We also authorize the Bank to debit my/our account for applicable charges against availing transactional services to SEBL internet banking.

Signatory-2:

 Signature:
 Name:
 E-mail:
 Mobile No:
 Date:

Signatory-3:

 Signature:
 Name:
 E-mail:
 Mobile No:
 Date:

*** If the account operates by two or more signatures, transactional services will not be allowed over the internet banking.**