

Southeast Bank Limited

.....Branch

Registration Form for Internet Banking Service

(Applicable for Individual/Joint Account only)

Individual Account

Joint Account

- Name (Block Letter).....
- Mailing Address.....
- Customer (Master) A/C No..... or Joint A/C No (In case of Joint A/C)
- Email Address1..... Email Address2.....
- Telephone..... Mobile.....

SEBL internet banking service will be linked to all accounts under your Customer ID or to the designated joint account

Services to be availed:

A. <input type="checkbox"/> Account Balance Inquiry	E. <input type="checkbox"/> Fund Transfer (Not applicable for Joint A/C):
B. <input type="checkbox"/> Account Statement View and Download	<input type="checkbox"/> Within Own Accounts
C. <input type="checkbox"/> Account Information View	<input type="checkbox"/> To Other Customer Account of SEBL
D. <input type="checkbox"/> Total Portfolio Report	<input type="checkbox"/> To Account Maintained at Other Bank
F. <input type="checkbox"/> Account Opening by Fund Transfer:	G. <input type="checkbox"/> Utility Bill Payment:
<input type="checkbox"/> FDR Account	<input type="checkbox"/> WASA
<input type="checkbox"/> Monthly Deposit Scheme Account	<input type="checkbox"/> Electricity (DPDC/DESCO/PDB/REB)
<input type="checkbox"/> Double Benefit Scheme Account	<input type="checkbox"/> Gas
<input type="checkbox"/> Monthly Income Scheme Account	<input type="checkbox"/> Land Phone (BTCL)
<input type="checkbox"/> Other (specify)	*Please enclose bill copy for registration
	<input type="checkbox"/> Post Paid Mobile Bill (GP/ Bangla Link)
	<input type="checkbox"/> Prepaid Mobile Bill
H. <input type="checkbox"/> Student Tuition Fees Payment:	
<input type="checkbox"/> North South University	<input type="checkbox"/> BRAC University
<input type="checkbox"/> Other (Specify)	
I. <input type="checkbox"/> For SEBL credit card payment (Local Currency): Card No.	

*Gray marked services will be available soon.

I/We also agree the use of Internet Banking shall be governed by Terms and Conditions maintained in the Bank's website <https://www.southeastbank.com.bd> and/or in the registration form. I/We understand the security concerns of online banking and ensure that I/We will keep the user id and password confidential. I/We agree that any unauthorized access/transaction will not liable to the bank.

If any of the accounts above is a joint account, then the other signatory are required to fill up the form at annexure-1.

Common question and secret answer for password reset, activation or stop of Internet Banking Service:

- i. Question: Your date of birth? Answer:
- ii. Question: Your favorite game? Answer:
- iii. Question: Your mother's name? Answer:
- iv. Question: Your favorite color? Answer:

Preferable internet banking User ID:

Charges/Renewal Fee: Annual Maintenance Fee of Tk. 200 plus 15% VAT only

Signature of the first applicant

Date.....

[In case of Joint A/C, Annexure-1 needs to be filled up. * marked information has been kept for future service facility.]

For Branch Use Only:

Date.....

Internet Banking User ID

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

Approved By:

Authorized Signature

Authorized Signature

Alternative Delivery Channels (ADC) Use Only:

Applicant's signature / secrete answer of common question verified, Role assigned and User ID "NET" activated by

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

Southeast Bank Limited
Internet Banking Service

ANNEXURE -1

(To be filled up by joint Account Holders)

Joint Account No.....

Account Title

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 SEBL to debit my/our account for applicable charges related to internet banking service.

Signatory-2:

.....
Signature:
(Name:)

Customer Account No :.....
Date :

Signatory-3:

.....
Signature:
(Name:)

Customer Account No :.....
Date :

[* marked information has been kept for future service facility]

Southeast Bank Limited

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Registration Form for Internet Banking (IB) Service (Applicable for Organization Account)

- Applicant/Signatory Name (Block Letter).....
 - Account Title
 - Mailing Address of Applicant/Signatory.....
 - Business Address of the Organization.....
 - Account (Master) No..... Group ID (If Any).....
 - Email Address1..... Email Address2.....
 - Telephone.....Mobile.....
- SEBL internet banking service will be linked to all accounts under the Customer ID

<p>A. <input type="checkbox"/> Account Balance Inquiry</p> <p>B. <input type="checkbox"/> Account Statement View and Download</p> <p>C. <input type="checkbox"/> Account Information View</p> <p>D. <input type="checkbox"/> Total Portfolio Report</p>	<p>E. <input type="checkbox"/> Fund Transfer:</p> <p style="margin-left: 20px;"><input type="checkbox"/> Within Own Accounts</p> <p style="margin-left: 20px;"><input type="checkbox"/> To Other Customer Account of SEBL</p> <p style="margin-left: 20px;"><input type="checkbox"/> To Account Maintained at Other Bank</p>
<p>F. <input type="checkbox"/> Account Opening by Fund Transfer:</p> <p style="margin-left: 20px;"><input type="checkbox"/> FDR Account</p> <p style="margin-left: 20px;"><input type="checkbox"/> Monthly Deposit Scheme Account</p> <p style="margin-left: 20px;"><input type="checkbox"/> Double Benefit Scheme Account</p> <p style="margin-left: 20px;"><input type="checkbox"/> Monthly Income Scheme Account</p> <p style="margin-left: 20px;"><input type="checkbox"/> Other (specify)</p>	<p>G. <input type="checkbox"/> Utility Bill Payment:</p> <p style="margin-left: 20px;"><input type="checkbox"/> WASA</p> <p style="margin-left: 20px;"><input type="checkbox"/> Electricity (DPDC/DESCO/PDB/REB)</p> <p style="margin-left: 20px;"><input type="checkbox"/> Gas</p> <p style="margin-left: 20px;"><input type="checkbox"/> Land Phone (BTCL)</p> <p style="margin-left: 40px;">*Please enclose bill copy for registration</p> <p style="margin-left: 20px;"><input type="checkbox"/> Post Paid Mobile Bill (GP/ Bangla Link)</p> <p style="margin-left: 20px;"><input type="checkbox"/> Prepaid Mobile Bill</p>
<p>H. <input type="checkbox"/> Student Tuition Fees Payment:</p> <p style="margin-left: 40px;"><input type="checkbox"/> North South University <input type="checkbox"/> Other (Specify)</p>	
<p>I. <input type="checkbox"/> For SEBL credit card payment (Local Currency): Card No.</p>	

*Gray marked services will be available soon.

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 available on the Bank's website <https://www.southeastbank.com.bd> and/or in the registration form. I/We authorize the applicant for any kind of transaction (Utility Bill Payment, Fund Transfer etc.) through Internet Banking Service. I/We understand the security concerns of online banking and ensure that the applicant will keep the user id and password confidential. I/We agree that any unauthorized access/transaction will not liable to the bank.

Common question and secret answer for password reset, activation or stop of Internet Banking Service:

- i) Question: Applicant's date of birth? Answer:
- ii) Question: Applicant's favorite game? Answer:
- iii) Question: Applicant's mother's name? Answer:
- iv) Question: Applicant's favorite color? Answer:

Charges/Renewal Fee: Annual Maintenance Fee of Tk. 200 plus 15% VAT only

Preferable internet banking User ID:

Signature of the applicant/
Signatory1
Name:.....

Signature of Signatory 2
Name:.....

Signature of Signatory 3
Name:.....

For Branch Use Only:

Date.....

Internet Banking User ID

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

Approved By:

Authorized Signature

Authorized Signature

Alternative Delivery Channels (ADC) Use Only:

Applicant's signature / secrete answer of common question verified, Role assigned and User ID "NET" activated by

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