

Online Banking for Business Authorization Form

Is this a new Setup?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Maintenance	

Authentication Method desired:	<input type="checkbox"/> Token App <input type="checkbox"/> Secure Browser
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Primary Company Name and Tax ID:	Company Address:
Company Administrator:	Email Address:
Preferred Login:	Contact Phone:
Secondary Company name and Tax ID: (if any)	

Account #	Nickname (optional)

Treasury Management Services (check all that apply):

<input type="checkbox"/>	Internal Transfers	<input type="checkbox"/>	eWires	<input type="checkbox"/>	Lockbox Services
<input type="checkbox"/>	Bill Pay	<input type="checkbox"/>	eACH	<input type="checkbox"/>	Image Cash Letter (ICL)
<input type="checkbox"/>	Remote Deposit Capture	<input type="checkbox"/>	eStatements	<input type="checkbox"/>	Allow Cross Account Transfer (if multiple entities)

I _____ business authorized signer name), the _____ (title) of the above named business, do hereby authorize First Financial Northwest Operated by Global Federal Credit Union to set up an Online Banking profile and designate _____ as the administrator.

We have read and agreed to the Terms and Conditions for Use of First Financial Northwest Operated by Global Federal Credit Union's Online Banking Internet Site, including those provisions specially related to the administrator role.

Designated Administrator Name	Signature	Date
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Business Authorized Signer Name	Signature	Date
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Office Use Only

Authorized Signer Information Verified by:		OLB Setup completed by:	
Bankers Name:		Market Segment Assigned	
Bankers Initials		Employee Initials:	
Date:		Date:	