**Online Banking Services Application Form**

**网上“企业银行”申请表**

Please fill out the form in **English Block Letters** and check (🗷) where appropriate.请以英文印刷体填写表格，并叉选 (🗷) 对应项目。

Date (mm/dd/yyyy):

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| **For new customer of online banking services 本表仅限网上“企业银行”新开户使用** |
| **Customer Information (All fields required) 客户信息（以下所有内容为必填项）** |
| Customer Name单位名称 |       | Tax ID税号 |       |
| Mailing Address通讯地址 |       |
| City市 |       | State州/省 |       | Zip Code邮政编码 |       |
| Contact Person Name联系人姓名 |       | Email邮箱 |       | Phone电话 |       |
| **Note: This mailing address is used for online banking related mails only. 注：本通讯地址仅用于寄送网上“企业银行”相关信件** |
|  |
| Administrator Name 1:系统管理员姓名1 | [ ] Mr.先生[ ] Ms.女士 |       | Dept.:部门 |       | Position:职位 |       |
|  |  Phone: 电话 |       | Email:邮箱 |       |
|  |  |  |  |  |  |  |
| Administrator Name 2:系统管理员姓名2 | [ ] Mr.先生[ ] Ms.女士 |       | Dept.:部门 |       | Position:职位 |       |
|  |  Phone: 电话 |  | Email:邮箱 |       |
| **Note: Each administrator has a digital certificate. 注：每位系统管理员持有一个数字证书。** |
| Charge Account: 指定扣费账户 |       | Functions:业务功能 | [x]  Account Enquiry 账务查询[ ]  NY Settlement Business 纽约分行支付结算[ ]  NY Foreign Exchange Application纽约外汇交易网上申请 |
|  |
| **Account(s) to be opened on Online Banking 需要开通网上银行的账号：** |
| Account No.:账号 |       | Account No.:账号 |       | Account No.:账号 |       |
| Account No.:账号 |       | Account No.:账号 |       | Account No.:账号 |       |
|  |
| **Customer Signature: I have read and agree to the terms stated on the E-banking Service Agreement.**  |
| **Signature (s) of Authorized Signatory(ies) 有权签字人签名：** |

**If you choose to send us this form electronically, please email to** **Banking@ny.cmbchina.com**

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| **Bank Use Only以下由银行填写** |
| **Consent from Account Officer for Loan Customers:**  |  | (Name and Signature)  |
|  |
|  **Operations Department (Online Banking)** We acknowledge receipt of this form on (Time, Date), (Name and Signature) [ ]  Email [ ]  Mail [ ]  In Person   Customer signature(s) verified by: (Name and Signature) [ ]  Call Back if by Email  Spoke to: Time: Caller: (Name and Signature)  CMBRUN Customer ID: , Online Banking Customer ID:  Created by: (Name and Signature) Authorized by: (Name and Signature) Customer User ID(s) and Password(s) were sent to Customer by [ ]  Mail [ ]  Email on (Time, Date), (Name and Signature) |
|  **Operations Department (Digital Certificate)** We acknowledge receipt of this form on (Time, Date), (Name and Signature) USB-Key ID(s) issued: 1: , 2:   USB-Key(s) issued by: (Name and Signature) USB-Key(s) authorized by: (Name and Signature) USB-Key(s) sent to customer on (Time, Date), (Name and Signature) |