



Amend iBB Limits, Modules and Charging Account on iBusiness Banking (iBB)

How to complete the form

1 Please use a BLACK pen

2 Mark boxes like this
If you make a mistake, do this and mark the correct box

3 Please use BLOCK CAPITAL LETTERS and leave one space between each word A 2

Entity Name
An Existing User ID

Section 1 – iBB Limits

The limits quoted below (subject to our approval) are in replacement of and not in addition to any limits shown in the original iBB Letter of Confirmation. Please ensure a copy of this form is kept with the Letter of Confirmation.

Single Entity - Please complete the following sections

Cash Management limit: £ Daily
(Maximum amount of payments to be made using account transfers, third party payments, CHAPS and International payments)

Forward Value Credit limit: £ Daily Weekly Monthly (please tick as applicable)
(Maximum amount of Bulk payments during the period)

Forward Value Debit limit: £ Daily Weekly Monthly (please tick as applicable)
(Maximum amount of Bacs collections during the period)

Group Entity - please complete the following sections

Total Group Limits

Cash Management limit: £ Daily
(Maximum amount of payments to be made by the Group using account transfers, third party payments, CHAPS and International payments)

Forward Value Credit limit: £ Daily Weekly Monthly (please tick as applicable)
(Maximum amount of Bulk payments to be made by the Group during the period)

Forward Value Debit limit: £ Daily Weekly Monthly (please tick as applicable)
(Maximum amount of Bacs collections to be made by the Group during the period)

Entity Name:

Cash Management limit: £ Daily
(Maximum amount of payments to be made using account transfers, third party payments, CHAPS and International payments)

Forward Value Credit limit: £ Daily Weekly Monthly (please tick as applicable)
(Maximum amount of bulk Bacs payments during the period)

Forward Value Debit limit: £ Daily Weekly Monthly (please tick as applicable)
(Maximum amount of Bacs collections during the period)

Entity Name:

Cash Management limit: £ Daily
(Maximum amount of payments to be made using account transfers, third party payments, CHAPS and International payments)

Forward Value Credit limit: £ Daily Weekly Monthly (please tick as applicable)
(Maximum amount of bulk Bacs payments during the period)

Forward Value Debit limit: £ Daily Weekly Monthly (please tick as applicable)
(Maximum amount of Bacs collections during the period)

Section 2 – iBB Modules

Please amend the available iBB modules to:

| | | Add | Delete |
|-------------------|-----------------------------------------------------------------------|--------------------------|--------------------------|
| a) Payments | Inter Account Transfers, Single Payments, CHAPS and Currency Payments | <input type="checkbox"/> | <input type="checkbox"/> |
| b) iBulk Payments | Bulk Payments (e.g. salary files) | <input type="checkbox"/> | <input type="checkbox"/> |

Please note, options a & b include view account information

| | | | |
|-------------------------------|-----------------------------------------------------------------------------|--------------------------|--------------------------|
| c) View only (free of charge) | View Account Information only (where no payment modules have been selected) | <input type="checkbox"/> | <input type="checkbox"/> |
|-------------------------------|-----------------------------------------------------------------------------|--------------------------|--------------------------|

Separate payment limits are required for the Domestic Payments, International Payments and iBulk Payments modules. When amending iBB modules please undertake a review of your existing limits to ensure they are adequate for your business requirements and complete the appropriate limits section on the previous page as required.

When applying for the iBulk Payments module, complete the details below and an iBB Bacstel-IP Indirect User Application form may also be required.

| Business Accounts Account Name | NSC | Account Number | Bulk Settlement | |
|-----------------------------------|----------------------|----------------------|--------------------------|--------------------------|
| | | | DR | CR |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If the account is to be used for settlement purposes, mark Dr for Direct Debiting, mark Cr for crediting.

If applicable, complete a Bacstel-IP Amendment Form to register any additional Bacs settlement account(s) against your Bacs Service User Number (SUN).

Section 3 – iBB Charging Account

Please amend the Account used for the deduction of iBB quarterly Fees and Service Charges to:

| Account Name | NSC | Account Number |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Authorisation

We, the Customer, wish to amend the details of our previously signed Application for iBB. We acknowledge that this document is subject to the Terms and Conditions of the iBB Agreement.

Signed on behalf of the Entity noted above in accordance with our existing mandate for iBB.

| AUTHORISED SIGNATORY 1 | AUTHORISED SIGNATORY 2 |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <input type="text"/> | <input type="text"/> |
| Date <input type="text"/> / <input type="text"/> / <input type="text"/> | Date <input type="text"/> / <input type="text"/> / <input type="text"/> |

Once completed, please forward this Amendment request to your Business Centre as we will be unable to process your request unless it is signed.



Information correct as at July 2021

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