

PREMIER ONLINE BANKING

BUSINESS REGISTRATION FORM



Date: _____ TIN#: _____

Name of Customer: _____

Business Name: _____

Address: _____

Phone(s): _____

Email Address: _____

SELECT ONE:

New Business Online Account

New Account Existing Business Online

New Employee Access

Username / Password: Please choose a Username that is unique and one you can remember as this will not change. If you choose a Password on this application you will be REQUIRED to change your password at first sign-on to maintain account security. If you DO NOT choose a password at this time, we will assign 1234 as your password; and you will still be required to change it at first sign-on.

USERNAME: _____ PASSWORD: _____

Account Access: (You must be an owner of the account(s) listed. Transfer capability will not be given unless requested. If these are joint accounts, other parties must sign also.) Transfer Authorizations are available for Checking and Savings accounts ONLY.

Bill Pay Enrollment: Bill Pay Interface is enabled by The Union Bank. This form allows that feature to be enabled. All conditions, terms, and agreements are disclosed at the time of enrollment with CheckFree Bill Pay. Please note that this option is available for Checking accounts ONLY.

ACCOUNTS	TRANSFER AUTHORIZATION	CHECKFREE BILL PAY
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I UNDERSTAND THAT I AM IN FULL CONTROL OF MY ACCOUNT(S). IF AT ANYTIME I DECIDE TO DISCONTINUE, I WILL PROVIDE WRITTEN NOTIFICATION TO THE UNION BANK. MY SIGNATURE ALSO INSTRUCTS THE BANK TO WITHHOLD MY NAME FROM ANY THIRD PARTY AFFILIATES AS OUTLINED IN THE ONLINE BANKING AGREEMENT.
 COMMERCIAL BILL PAY = \$5.00 PER MONTH - PER ACCOUNT.

CUSTOMER NAME PRINT: _____ DATE: _____

CUSTOMER SIGNATURE: _____ DATE: _____

PLEASE COMPLETE AND RETURN TO THE UNION BANK BY DROPPING OFF AT YOUR LOCAL BRANCH;
 BY FAX (318-253-9163); OR BY MAIL (ATTN. PREMIER ONLINE BANKING; PO BOX 39, MARKSVILLE, LA 71351).

BANK EMPLOYEE SIGNATURE: _____ DATE: _____