



# First National Bank

ALASKA

Member FDIC

## Business Essential Online Authorization

☐ New Authorization

☐ Revised Authorization

**Section A. Customer Information:** The following is the Contact Name & Address for contractual written notices required under the Business Essential Online Agreement between Customer and Bank and contact information for Customer's designated System Administrator(s).

Customer: \_\_\_\_\_

Tax ID: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Fax Number: ( ) \_\_\_\_\_

System Administrator 1: \_\_\_\_\_ Email: \_\_\_\_\_

System Administrator 2: \_\_\_\_\_ Email: \_\_\_\_\_

**Section B. Authorized Accounts:** The following account(s) may be accessed by use of the System to view balances and activity and to place stop payments. If so indicated, such accounts may also be accessed by use of the System to initiate transfer(s) of funds between accounts and to view/print Electronic Account Statements, Electronic Analysis Statements and/or Electronic Notices. Transfers include payments of indebtedness owed to Bank. Only sole proprietors may have access to both their personal and business accounts.

**Analysis Statements:** ☐ Electronic ☐ Paper ☐ N/A This pertains to all accounts of Customer on Account Analysis for purposes of determining compensation to Bank for services rendered. If multiple accounts are analyzed together as a Family, the consolidated analysis for the Family will also be provided in this medium.

**Escrow Accounts:** ☐ Authorized ☐ Not Authorized ☐ N/A If Authorized, all Escrow accounts for which Customer's Tax ID is listed, either as a payor or payee may be accessed by use of the System to view balances and account information.

Account Number: \_\_\_\_\_

Description: \_\_\_\_\_

Account Type: ☐ DDA ☐ SAV ☐ COD ☐ Loan

Action To Be Taken: ☐ Add ☐ Delete ☐ Change

Transfers: ☐ None ☐ In Only ☐ Out Only ☐ In & Out

Account Statements: ☐ Electronic ☐ Paper

Notices: ☐ Electronic ☐ Paper

Account Number: \_\_\_\_\_

Description: \_\_\_\_\_

Account Type: ☐ DDA ☐ SAV ☐ COD ☐ Loan

Action To Be Taken: ☐ Add ☐ Delete ☐ Change

Transfers: ☐ None ☐ In Only ☐ Out Only ☐ In & Out

Account Statements: ☐ Electronic ☐ Paper

Notices: ☐ Electronic ☐ Paper

Account Number: \_\_\_\_\_

Description: \_\_\_\_\_

Account Type: ☐ DDA ☐ SAV ☐ COD ☐ Loan

Action To Be Taken: ☐ Add ☐ Delete ☐ Change

Transfers: ☐ None ☐ In Only ☐ Out Only ☐ In & Out

Account Statements: ☐ Electronic ☐ Paper

Notices: ☐ Electronic ☐ Paper

Account Number: \_\_\_\_\_

Description: \_\_\_\_\_

Account Type: ☐ DDA ☐ SAV ☐ COD ☐ Loan

Action To Be Taken: ☐ Add ☐ Delete ☐ Change

Transfers: ☐ None ☐ In Only ☐ Out Only ☐ In & Out

Account Statements: ☐ Electronic ☐ Paper

Notices: ☐ Electronic ☐ Paper



**First National Bank Alaska  
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**Section B. Authorized Accounts, Cont'd**

<b>Account Number:</b> _____ <b>Description:</b> _____ <b>Account Type:</b> <input type="checkbox"/> DDA <input type="checkbox"/> SAV <input type="checkbox"/> COD <input type="checkbox"/> Loan <b>Action To Be Taken:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete <input type="checkbox"/> Change <b>Transfers:</b> <input type="checkbox"/> None <input type="checkbox"/> In Only <input type="checkbox"/> Out Only <input type="checkbox"/> In & Out <b>Account Statements:</b> <input type="checkbox"/> Electronic <input type="checkbox"/> Paper <b>Notices:</b> <input type="checkbox"/> Electronic <input type="checkbox"/> Paper	<b>Account Number:</b> _____ <b>Description:</b> _____ <b>Account Type:</b> <input type="checkbox"/> DDA <input type="checkbox"/> SAV <input type="checkbox"/> COD <input type="checkbox"/> Loan <b>Action To Be Taken:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete <input type="checkbox"/> Change <b>Transfers:</b> <input type="checkbox"/> None <input type="checkbox"/> In Only <input type="checkbox"/> Out Only <input type="checkbox"/> In & Out <b>Account Statements:</b> <input type="checkbox"/> Electronic <input type="checkbox"/> Paper <b>Notices:</b> <input type="checkbox"/> Electronic <input type="checkbox"/> Paper
<b>Account Number:</b> _____ <b>Description:</b> _____ <b>Account Type:</b> <input type="checkbox"/> DDA <input type="checkbox"/> SAV <input type="checkbox"/> COD <input type="checkbox"/> Loan <b>Action To Be Taken:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete <input type="checkbox"/> Change <b>Transfers:</b> <input type="checkbox"/> None <input type="checkbox"/> In Only <input type="checkbox"/> Out Only <input type="checkbox"/> In & Out <b>Account Statements:</b> <input type="checkbox"/> Electronic <input type="checkbox"/> Paper <b>Notices:</b> <input type="checkbox"/> Electronic <input type="checkbox"/> Paper	<b>Account Number:</b> _____ <b>Description:</b> _____ <b>Account Type:</b> <input type="checkbox"/> DDA <input type="checkbox"/> SAV <input type="checkbox"/> COD <input type="checkbox"/> Loan <b>Action To Be Taken:</b> <input type="checkbox"/> Add <input type="checkbox"/> Delete <input type="checkbox"/> Change <b>Transfers:</b> <input type="checkbox"/> None <input type="checkbox"/> In Only <input type="checkbox"/> Out Only <input type="checkbox"/> In & Out <b>Account Statements:</b> <input type="checkbox"/> Electronic <input type="checkbox"/> Paper <b>Notices:</b> <input type="checkbox"/> Electronic <input type="checkbox"/> Paper

**Section C. Payment Of Fees:** The stop payment fee will be charged to the account that the subject item was drawn on. Bill Payment fees are charged to the first Authorized Account designated by use of the online enrollment process. Other fees incurred under the Business Essential Online Agreement are to be charged to Account # \_\_\_\_\_.

**Section D. Additional Internet Services:** Please contact Customer regarding additional Internet services offered by Bank. The additional Internet services Customer is specifically interested in obtaining are indicated below:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Direct Deposit         | <input type="checkbox"/> Federal Tax Payments  | <input type="checkbox"/> ACH Remittance Information (EDI) |
| <input type="checkbox"/> Vendor Payments        | <input type="checkbox"/> Cash Concentration    | <input type="checkbox"/> Other ACH: _____                 |
| <input type="checkbox"/> Wire Transfer Services | <input type="checkbox"/> Bill Payment Services |   |

**Acknowledgement:** By signing below, I acknowledge I have read and agree to the Business Essential Online Terms and Conditions.

**Customer**

By: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

By: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

**Bank Use**

Accepted By: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Date: \_\_\_\_\_

<i>Bank Operations Support/Review Unit</i>
Client #: _____
Processed By: _____
Date: _____

