Citizens FINANCIAL BANK
Personal, business banking

# Business Online Banking – Upgrade / Change Request

Please fax completed form to 219-836-0265.

Business Name | Business Phone | Business Fax

## 1. Add User(s)

Employee Name: _____
Business E-mail: _____
a. What accounts will the new user have rights to?
Number: _____
Number: _____
Number: _____
b. What amenities will the new user have rights to?

- ☐ Stop Payments
- ☐ Transfer Between Internal Accounts
- ☐ Check Images
- ☐ E-Statements
- ☐ Payroll Direct Deposit
- ☐ Transfer To / From Other Banks
- ☐ Wire Transfers
- ☐ Tax Payments
- ☐ Positive Pay

Employee Name: _____
Business E-mail: _____
a. What accounts will the new user have rights to?
Number: _____
Number: _____
Number: _____
b. What amenities will the new user have rights to?

- ☐ Stop Payments
- ☐ Transfer Between Internal Accounts
- ☐ Check Images
- ☐ E-Statements
- ☐ Payroll Direct Deposit
- ☐ Transfer To / From Other Banks
- ☐ Wire Transfers
- ☐ Tax Payments
- ☐ Positive Pay

## 2. Remove Users

Employee Name: _____
Employee Name: _____

## 3. Add / Remove Accounts

| Add | Remove | |
|---|---|---|
| ☐ | ☐ | Number: _____ |
| ☐ | ☐ | Number: _____ |

## 4. Add / Remove Amenities

| Add | Remove | |
|---|---|---|
| ☐ | ☐ | Stop Payments |
| ☐ | ☐ | Transfer Between Internal Accounts |
| ☐ | ☐ | Check Images |
| ☐ | ☐ | E-Statements |
| ☐ | ☐ | Payroll Direct Deposit |
| ☐ | ☐ | Transfer To / From Other Banks |
| ☐ | ☐ | Wire Transfers |
| ☐ | ☐ | Tax Payments |
| ☐ | ☐ | Positive Pay |

* If adding amenities, will all employees have rights to each amenity added? ☐ Yes ☐ No
If no, the Business Resource Center will contact you for clarification.

## 5. Change Authorized User Information

Employee Name: _____
Business E-mail: _____

Employee Name: _____
Business E-mail: _____

Employee Name: _____
Business E-mail: _____

## 6. Change Primary Contact Information

Name: _____
Business Phone: _____
Business E-mail: _____

## 7. Other Requests

## 8. Authorized Signature

Print Name: _____

_____
Signature Date

**BANK USE ONLY**
Completed by: _____ Date: _____
Audited by: _____ Date: _____
Notes