



Bacstel-IP

Direct User Applicat	ion Form												
How to complete the fo	<u>rm</u>												
Please use a BLACK pen	2 Mark boxes like this If you make a mistake, do this and mark the correct box	Please use BLOCK CAPITAL A 2 LETTERS and leave one space between each word											
This Application Form relates to the provision of access to the Bacstel-IP service and establishes the Customer Profile for the service. Allied Irish Bank (GB) is responsible for your sponsorship into the Bacstel-IP service. Components of the service are provided by Bacs Payment Schemes Limited (Bacs) and the Royal Bank of Scotland Group. The Royal Bank of Scotland Group will issue Smartcards and PIN numbers required to enhance the security of the service.													
By signing this form you will be agreeing to the Customer Agreement for the Bacstel-IP Direct Service and the Business Customer Agreement for the TrustAssured Service.													
Please complete all sections in black ink and BLOCK CAPITALS. New Application Transfer of Sponsorship from													
New Application Tra	nsfer of Sponsorship from Bank												
1. Customer details													
Bacs Service User name (Name	used to identify the Service User – maximum 33	characters.)											
Trading name (if applicable)													
Bacs Service User Number													
For new Users, this number will	the Service User. Existing Bacs Users should con be allocated by the Bank and should therefore b information will be sent to this electronic mail ac	e left blank.											
	s email address to contact you once the set up pobligations to comply with the relevant Bacs sche	process is complete. You will be asked to confirm teme rules before being able to access the											
Contact address for Service User and for the dispatch of Smartcar	. This address will be used to contact the Primar ds and PINs.	y Security Contacts (PSC) defined in Section 8											
Address													
City and county		Postcode											

2. Organisation details Each Service User must be associated with an organisation, and an organisation may have many Service Users associated with it. If this Service User is to be associated with an organisation already set up, complete the name and the ID (if known) of that organisation. If not, complete the required name below. This can be the same as the Service User name. Bacs will generate an organisation ID. If left blank, the organisation name will default to the name of the Service User. Organisation ID If known (generated by Bacs). For companies registering for Bacstel-IP for the first time, this ID will have not been allocated. 3. Application type Select the types of Transaction that you will be using with this Service User. Tick all that apply. Payments (Direct Credit) Direct Debit **AUDDIS** Paperless Direct Debiting under the AUDDIS rules Additional documents must be completed to support AUDDIS and Paperless Direct Debiting - please refer to your Relationship Manager. 4. Submission channel Is the Service User to whom this application relates undertaking: Direct Submissions only Both Direct and Indirect

5. Bank Account details

Specify the sterlifacilities.	ing Bank Accounts to be u	ised by this Service User and any limits and the limit peric	od (frequency) for crediting						
1. Branch NSC		Account number	Transaction types (tick)						
Account name			Payments (Credits)						
Limit £		Frequency	Direct Debits						
2. Branch NSC		Account number	Transaction types (tick)						
Account name			Payments (Credits)						
Limit £		Frequency	Direct Debits						
3. Branch NSC		Account number	Transaction types (tick)						
Account name			Payments (Credits)						
Limit £		Frequency	Direct Debits						
4. Branch NSC		Account number	Transaction types (tick)						
Account name			Payments (Credits)						
Limit £		Frequency	Direct Debits						
5. Branch NSC		Account number	Transaction types (tick)						
Account name			Payments (Credits)						
Limit £		Frequency	Direct Debits						
6. Branch NSC		Account number	Transaction types (tick)						
Account name			Payments (Credits)						
Limit £		Frequency	Direct Debits						
If further Allied II Accounts Form.	rish Bank (GB) Bank Accou	unts are required to be linked to this User, please complete	e the separate Additional						
6. Software pa	ackage name(s)								
	proved software product reprovided by the software s	names and version numbers of all Bacs software package supplier).	s that are used by this service						
1.									
2.									
3.									

7. Bacs Approved Bureau for contingency purposes or Indirect Submissions For direct submitters it is recommended for contingency purposes that all Service Users have a relationship set up with a Bacs Approved Bureau. If you have such a relationship, enter the Bureau name and the Bureau Service User number (if known) below. Bureau name (Name used to identify Bureau.) Bureau Service User number В Please tick to confirm that the appointed Bureau has been approved by Bacs Where a Bureau is appointed, Bacs is authorised to act on all instructions received. 8. Mandatory - New Primary Security Contact details Two Primary Security Contacts (PSC) must be set up as a minimum with Smartcards. A PSC is the main contact for the Service PSCs can act on their own in amending the Customer Profile, appointing Additional Contacts and in all other respects in connection with Bacstel-IP. PSCs cannot add privileges to their own profile or assign signing and submitting privileges to contacts. You should refer to the Bacstel-IP Service User Guide for more information on Primary Security Contacts, Additional Contacts and privileges. 1) The TrustAssured Service Business Customer Application has been completed and is attached. 2) The TrustAssured Service Business Customer Authorised Security Contact Application Form has been completed and is attached. The first two PSCs listed will be required to complete a short, online Bacs training module and test before the Service User can be activated. Instructions on how to complete this training will follow once your application has been processed. 3) PSCs/ACs are aware of their obligations to comply with the relevant Bacs scheme rules 9. Optional - Additional Contact details For a new Primary Security Contact (PSC) or Additional Contact (AC) requiring a PKI Smartcard (for submission and signing privileges), please also complete the TrustAssured Service Business Customer Authorised Security Contact Application Form. Contact details 1 Please link to SUN Contact type (tick one) Primary Security Contact (PSC) Additional Contact (AC) Security method PKI Smartcard Alternative Security Method (ASM) (User ID/ (Submission and signing privileges) Password)(For report access privileges only) Title Mr/Mrs/Miss/Ms/Other - please specify Contact name (First name and surname.) Day Month Year Security questions Contact's date of birth Contact's mother's maiden name (This will be used for identification purposes when contacting Allied Irish Bank (GB).) Contact email address Business phone number Out of hours phone number (Please include area code. Only supply a phone number if the contact is willing to accept calls out of normal hours.) PSC/AC is aware of their obligations to comply with the relevant Bacs scheme rules.

Contact details 2 Please link to SUN Contact type (tick one) Primary Security Contact (PSC) Additional Contact (AC) Security method Alternative Security Method (ASM) (User ID/Password) PKI Smartcard (Submission and signing privileges) (For report access privileges only) Title Mr/Mrs/Miss/Ms/Other - please specify Contact name (First name and surname.) Day Month Security questions Contact's date of birth Contact's mother's maiden name (This will be used for identification purposes when contacting Allied Irish Bank (GB).) Contact email address Business phone number Out of hours phone number (Please include area code. Only supply a phone number if the contact is willing to accept calls out of normal hours.) PSC/AC is aware of their obligations to comply with the relevant Bacs scheme rules. Contact details 3 Please link to SUN Contact type (tick one) Primary Security Contact (PSC) Additional Contact (AC) Security method Alternative Security Method (ASM) (User ID/Password) PKI Smartcard (Submission and signing privileges) (For report access privileges only) Title Mr/Mrs/Miss/Ms/Other - please specify Contact name (First name and surname.) Day Month Year Security questions Contact's date of birth Contact's mother's maiden name (This will be used for identification purposes when contacting Allied Irish Bank (GB).) Contact email address Business phone number Out of hours phone number (Please include area code. Only supply a phone number if the contact is willing to accept calls out of normal hours.) PSC/AC is aware of their obligations to comply with the relevant Bacs scheme rules.

10. Declaration

We apply to use the Bacstel-IP service as detailed within this Application Form and agree to be bound by the Terms & Conditions of the service contained in the Customer Agreement for the Bacstel-IP Direct Service.

We agree:

- We will ensure that all **Primary Security Contacts and Additional Contacts are made aware of their obligations to comply with the relevant Bacs scheme rules** and will take care of all security procedures supplied to them for Bacstel-IP as described in the Customer Agreement and User Guide. Any reference to giving the Bank instructions in the Customer Agreement shall also apply to any instructions which appear to come from us, or third parties we have appointed as detailed on the Customer Profile for Bacstel-IP and given to Bacs in accordance with the security procedures and the Customer Agreement.
- That each Primary Security Contact acting alone has authority to appoint Additional Contacts, to amend the approval processes for all instructions and to amend the Customer Profile. When providing us with any information (including personal data) relating to identifiable living individuals you will have ensured that those individuals have consented, to the extent that it is required, to providing us with their information or that another lawful basis for the processing of their information has been established and that those individuals are aware of our identity and of our data protection notice.
- To the Bacstel-IP Customer Profile which has been detailed in this form and understand that detailed instructions and conditions relating to the use of Bacstel-IP are contained in the online Help Texts and User Guides.
- That the Primary Security Contact authority contained in this Application Form (Customer Profile) may differ from any other Mandates and authorities you hold relating to the applicable Accounts with you.
- That if the authority of a Primary Security Contact or an Additional Contact is removed we will inform AIB Group (UK) p.l.c. Bacs Customer Service.
- That, by signing this form, we are authorising and requesting that you, the Bank, accept debits to the Account(s) referred to in section 5 above in respect of the total value of all payments contained in each and every submission made or purporting to be made on our behalf (including by any Bacs Approved Bureau notified by us to you, the bank) to Bacs and processed by Bacs, provided such payments are within the current limit agreed between you and us, the Customer. You agree that any such submission to Bacs may be made using any PKI service or such other submission method as may be agreed from time to time.
- We will take appropriate steps to secure our information using anti-virus/anti-malware software as per section 7.1 of the Custmer Agreement for the Bacstel-IP Direct Service.
- To authorise AIB Group (UK) p.l.c. trading as Allied Irish Bank (GB) to act in accordance with instructions issued by the
 Primary Security Contacts (PSCs) and/or Additional Contacts (ACs) nominated within 1) the TrustAssured Service Business
 Customer Authorised Security Contact Application Form and/or 2) the Bacstel-IP Direct User Application Form.

For and on behalf of (Company name)													
Partnership/Limited Company/PLC*													
Authorised signature**													
								Day		Mont	h	,	Year
							Date		/		/		
Name													
Position													
For and on behalf of (Company name)													
Partnership/Limited Company/PLC*													
Authorised signature**													
								Day		Mont	h	,	Year
							Date		/		/		
Name													

Position

^{*} Delete as appropriate.

^{**} For customers who have agreed to the Customer Agreement, and for all Partnerships and Sole Traders, this Declaration to be signed by authorised person(s) in accordance with the Mandate.

For branch use only I confirm that: Company representatives are fully aware of their obligations to comply with the relevant Bacs scheme rules. The Customer Account details quoted are correct. Section 10 of the application orm has been signed by an authorised person(s) in accordance with the Mandate. The Customer has authority to debit the Bank Accounts in Section 5 (crediting only) and that the Accounts in Section 5 are in the name of the same legal entity that has been approved as a Direct Debit Originator (debiting only). The application is (please tick one box only); New Facility; Transfer in from another bank; Bank name: Branch NSC Payment limit(s) defined above have been authorised and a copy of Branch/Head office sanction is attached. A specific contingent liability Account has been opened.

(AUDDIS / Paperless only) Completed Application to be an Originator of Direct Debit Instructions under the Yes No AUDDIS Rules and/or Application to be a Paperless Originator of Direct Debit Instructions

(AUDDIS / Paperless only) Completed Automated Direct Debit Instruction Service (AUDDIS) and Paperless

Proof of identity and address has been obtained for all contacts with signing and submitting privileges.

The TrustAssured Service Business Customer Application and TrustAssured Service Business Customer Authorised

Number

The Customer Agreement for the Bacstel-IP Direct Service and the TrustAssured Service Business

Direct Debit (PDD) verification of Originator's Vetting Criteria is attached and countersigned by the sanctioning Yes No area confirming the verification measures the Customer has in place to

Branch brand:

Bacs Customer Service contact details

Address: Bacs Customer Service, First Trust Centre, 92 Ann Street, Belfast, BT1 3HH.

Corporate & Commercial approval enclosed (Direct Debiting new facility).

Customer Bacs database contact details (DDO) enclosed (Direct Debiting).

under the AUDDIS Rules forms authorised and attached.

Customer Agreement have been issued to the customer.

Security Contact Application have been completed.

identify and validate their payers are appropriate.

Telephone: (01604) 235515

Relationship Manager's name Contact telephone number

Authorised signatory - Manager

Email address: bacssupport@aib.ie

Yes

If you need this brochure in Braille, in large print or on audio, ring 0345 600 5204[†] or ask your relationship manager. Customers with hearing difficulties can use our Text Relay Service by dialling 18001 0345 600 5204[†].

[†]Calls may be recorded. Call charges may vary - refer to your service provider. Call into any business centre | Phone 0345 600 5204[†] | www.aibgb.co.uk



Information correct as at May 2018

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