

<b>Bay Bank &amp; Trust Co.</b>		<b><i>Internet Banking: Cash Management</i></b>	
Important: Please complete the form below and return it to any Bay Bank & Trust Co. Branch			
PLEASE PRINT			
Company:		Taxpayer ID Number:	
Address:			
City:		State:	Zip Code:
Telephone: (    )	Fax: (    )	E-Mail Address:	
<b><i>Account Information</i></b> Accounts to be accessed on line (Checking, Savings, Loans, etc.)			
Account Numbers: _____			
Account Numbers: _____			
<b><i>Authorized Users:</i></b> <i>Note: Completion of User Access Form Required</i>			
User Name: _____	User Name: _____	User Name: _____	
User Name: _____	User Name: _____	User Name: _____	
<b><i>Authorization:</i></b> <i>By signing below, I/we acknowledge and agree that the initial use of this service signifies that I/we have read and accept all of the terms and conditions of the Internet Banking Agreement, and Privacy and Security disclosure.</i>			
Authorized Signature:		Date:	
Additional Authorized Signature (if required):		Date:	
<b><i>This application must be signed by all required signers in order to process this information</i></b>			

Bank Representative will contact you to complete the application process.

Services Offered: (Please Select One)

Basic Internet Access: \_\_\_\_\_ Account Activity, Export Files to Accounting Software, Loan Payments, Item Correction Request, Stop Payments and Messages.

Enhanced Internet Access: \_\_\_\_\_ Basic Internet Access, ACH, Wire Transfers and Tax Payments.

Bank Use Only: BB&T Rep Initials: \_\_\_\_\_ Branch/Dept.: \_\_\_\_\_ Date Rec'd \_\_\_\_\_

Authorized Signature(s) Identification \_\_\_\_\_

Deposit Servicing: \_\_\_\_\_ Date Entered: \_\_\_\_\_ By: \_\_\_\_\_