PROGRESSIVE BANK BUSINESS ONLINE BANKING ENROLLMENT FORM

COMPANY INFORMATION:							
Company:							
Address:						TIN/SSN	
City:			State:			Zip:	
Phone:		Cell:		Contact:			
Email Address:							
CHARGES (Bank Use Only)							
Charge to account:		Monthly Charge:		Branch:			
Comments:							

USER INFORMATION : ACCESSIBLE ACCOUNTS

Account Type: **SB =** Simply Business **BB** = Basic Business **BL** = Business Lite **CA** = Commercial Analysis **MMA =** Money Market **SAV =** Savings **RLOC =** Revolving Line of Credit **I L =** Installment Loan

NOTE: 1) If *View Only* is selected, no other access may be set.

Name & Email Address	Account Number	Type	Internal Transfers	View Only

SIGNATURE: By signing below, I hereby authorize THE BANK to issue a temporary password for my account which must be changed upon first entry into the system.

Signature **Printed Name** **Date**

NOTE: To maintain *Active* status, you must Log In to the Business Internet Banking System at least once every 180 days. It is *recommended* that you Log In at least once every 30 days.

Cash Management Product / Service Referrals:

I am also interested in: ***Payroll Direct Deposit*** ☐ ***Wire Transfer*** ☐ ***ACH*** ☐ ***PowerLink*** ☐

Return your completed form to any Progressive Bank Financial Center or mail to

Progressive Bank Cash Management Department, P. O. Box 4053, Monroe, LA 71211-4053.