



**Instructions for completing BOSVG EFT Application and Agreement Form:**

**Page 1 of 24** – Input the following:

- Customer name - i.e. Company/ Business name
- Country
- Customer Address for EFT Services - i.e. Company/ Business Address

**Page 2 of 24** – Input the following:

- Name of Authorized customer delegate - i.e. Name of the individual/individuals who would be using the application
- Title - i.e. Job Title
- Email Address
- Authorized Limit - a limit on the file amount that an individual can authorized before it is submitted to the bank for processing, e.g. \$25,000.00 or Unlimited
- Identify Authorization Role(s) - Import, Verify, Authorize or Full access
  
- User Authorizations Role Requested
  
- Client EFT Service Preference
  
- Estimated Frequency for all EFT Services
  
- Estimated Number of Transactions
  
- Customer Account to be debited for Payments
- Customer Account to be debited for Charges
- Customer Account to be credited for collections

**Page 3 of 24** – Input the following:

- Name, Email Address and Telephone Number of Administrator(s)
- Name and Signature of authorized signatory/ signatories.

**Page 18 of 24** – Requires the Name and Signature of Signatory or Signatories (if account requires two to sign).

**Page 24 of 24** – Input the following:

- Company Name
- BOSVG account number
- Signed this (date)
- For and on behalf of (company/ Business name)
- Signature of authorized signatory/ signatories.