



On-Line Banking Department Only		New Change
Keyed _____ / /	Verified _____ / /	

BUSINESS ON-LINE BANKING – USER ENROLLMENT FORM (2)

For help completing this form, please contact the On-Line Banking Department at (717) 896-5399

Company Name: _____ Date: _____

Client Number (EIN Number): _____

User Name: _____ Last 4 of SSN: _____

Employee Group: Administrator Supervisor User (Employee) (Refer to Form 4 for Access Rights)

User E-Mail Address: _____

User Business Phone: () _____ Ext. _____ Mobile Phone: () _____

User Log In ID (Usercode): _____ (Min: 5 characters; Max: 16 characters)

Your temporary password will be mailed upon the completion of the set-up

Security Questions (Required): _____

Security Answer (Required): _____

USER PERMISSIONS

Business Bill Pay Access: Yes No (If yes, the Sr Admin listed within this enrollment must also be enrolled for Business Bill Pay)

User's Access Times:

Access 24/7 M-F _____ AM to _____ AM / PM Other _____

USER ACCOUNT ACCESS

List all accounts and check the desired online access for the above User.

Account Number	Exports Quicken/ Quickbooks	View	Mobile Deposit	Bill Pay	Internal Transfers In	Internal Transfers Out	Stop Payments

Resolution Included (Must include a copy of most recent resolution.) The undersigned is authorized by the company to enter into this agreement and agrees to be abide by the Bank's On-Line Access Agreement as well as applicable Mobile Banking Terms and Conditions as in effect at any given time. Agreements will be emailed at time enrollment is processed. Upon first log in, each user agrees to all terms and conditions of such agreements.

Authorized Signature 1 (Per Resolution)

Printed Name

Date

Authorized Signature 2 (Per Resolution)

Printed Name

Date

Authorized Signature 3 (Per Resolution)

Printed Name

Date

Return completed forms to: Mid Penn Bank, Operations Center – OLB, 894 North River Road, Halifax PA 17032