

Business On Line Application Pack for Existing Customers

for completion
by Partnerships

A **Partnership** is a single business where two or more people share ownership. The partners are jointly responsible for running the business.

Bank of Ireland 



Partnership Legal Agreement

FOR BANK USE ONLY

APPLICATION VERIFIED

Signed (Authorised Official) Sig No. Date

CUSTOMER RELATIONSHIP MANAGER

Name (BLOCK CAPITALS) Email

Telephone BSUP (applicable) Yes No

If Yes, Commencement Date Finish Date

Branch Brand

1. Application, Indemnity & Acknowledgements

Customer name

Address

(hereinafter called the "Customer") wishes to access the Services hereinafter more particularly identified and in connection with the use of the Services the Customer is issuing to the Governor and Company of the Bank of Ireland (the "Bank") this Application.

A Bank of Ireland Business On Line Agreement ("Agreement") comprising the following:

- (a) Application, Indemnity and Acknowledgements;
- (b) Account Form;
- (c) Conditions of Use¹; and
- (d) Customer Handbook²

is to be entered into between the Customer and The Governor and Company of the Bank of Ireland ("Bank") in relation to certain electronic banking services (the "Services") being provided to the Customer by the Bank through the Internet or such other communications networks as may be authorised by the Bank from time to time in connection with the Services or any of them.

All documents listed at (a) - (d) above shall form part of this Agreement.

By execution of this Application, Indemnity and Acknowledgements, the Customer:

- (a) indemnifies and agrees to keep indemnified the Bank against all claims, demands, liabilities, losses, costs (including legal fees on a full indemnity basis), actions, proceedings, charges and expenses whatsoever and howsoever arising which the Bank may incur or suffer by reason of providing the Services to the Customer and including but not limited to:
 - (i) the Bank acting on any instructions received through the Services;
 - (ii) any breach by the Customer of this Application, Indemnity and Acknowledgements or of the Conditions of Use;
 - (iii) any errors contained in any instructions submitted by the Customer;
 - (iv) any unauthorised borrowings arising by reason of the operation of the Services by the Customer and authorises the Bank to debit any account(s) in the name of the Customer with any sums payable by the Customer under this indemnity, provided always, however, that the Customer shall not incur any liability for any such claims, demands, liabilities, losses, costs, actions, charges and expenses as are referred to in this paragraph where they arise out of any fraud or negligence duly proved on the part of the Bank or its employees. For the avoidance of doubt this indemnification shall also apply to any further electronic banking services provided by the Bank to the Customer which the Customer applies for (by application of the Administrators or otherwise) subsequent to the date of this Application, Indemnity and Acknowledgements (including but not limited to the provision of Electronic Funds Transmission Service).

If you wish to receive an update on the status of your application via text, please provide your mobile phone number here ;

- (b) hereby confirms to and for the benefit of the Bank that the Administrators may, (notwithstanding the terms of any mandates already provided by such Customer to the Bank in respect of the operation of its accounts) at any time and from time to time by letter in writing to the Bank, amend the provisions of any mandate given by the Customer to the Bank in respect of any Originating Account:
 - (i) by the deletion of certain account(s);
 - (ii) by the addition of certain account(s); or
 - (iii) by the addition and deletion of certain account(s).
- (c) acknowledges and agrees that if the Customer has an expressly agreed overdraft facility, that the Services shall be operated

¹ The text of this document is available at the following Bank website ("the Website") www.bankofireland.com or in paper format from Business On Line Support Unit, Bank of Ireland, Group Payments, Operation Centre (1st Floor), Cabinteely, Dublin 18.

² The text of this document is available at the Website www.bankofireland.com.

at all times within such facility. The Customer further acknowledges and agrees that any implied limit (if any) on any account of the Customer will not under any circumstances be recognised or taken into account in connection with the operation of the Services.

(d) You may nominate 1 or 2 Administrators - please complete fields below as appropriate.

hereby appoint(s)

Mr/Mrs Administrator 1 (**Block capitals - also to sign page 4 & 5**)

and Mr/Mrs Administrator 2 (where required) (**Block capitals - also to sign page 4 & 5**)

as Administrators of the Customer.

(e) Where the Customer has provided personal data to the Bank relating to individuals including but not limited to, directors, authorised signatories, administrators, users or beneficial owners, by signing this Application and Indemnity, we confirm that the Customer has informed those individuals that personal data relating to them has been or may be disclosed to the Bank and used by the Bank in accordance with Bank of Ireland's Data Privacy Summary provided with this Application and Indemnity. We further note that more detailed information is available in the full Bank of Ireland Data Privacy Notice which is available on request from the Bank or at www.bankofireland.com/privacy. This notice is a guide to how the Bank of Ireland Group processes personal data.

The Customer has read and agreed to be bound by this Application, Indemnity and Acknowledgments and all of its Terms and the Conditions of Use and the Customer Handbook, all of which as may be amended from time to time at the Bank's discretion. The Customer acknowledges that the Bank shall not accept any amendments, variations, replacements or substitutions to this Application, Indemnity and Acknowledgements, the Conditions of Use, or the Customer Handbook. Words and phrases not specifically defined in this Application, Indemnity and Application shall have the same meaning as in the Conditions of Use when used in this Application, Indemnity and Acknowledgements.

This Application dated the day of in the year

AUTHORISATIONS

Data Protection

Please note that if you are an existing Bank of Ireland Group customer we will continue to respect your marketing preferences with us. If for any reason you do not want to be contacted for marketing purposes by us please contact us on 01 6883674.

If you are not already a Bank of Ireland Group customer we will not contact you for marketing purposes unless you tell us you would like to be contacted. You can let us know this by contacting us on 01 688 3674.

PARTNERSHIP SIGNATURES

Partner 
(SIGNATURE) (Full name in block capitals)

Partner 
(SIGNATURE) (Full name in block capitals)

Partner 
(SIGNATURE) (Full name in block capitals)

Partner 
(SIGNATURE) (Full name in block capitals)

Partner 
(SIGNATURE) (Full name in block capitals)

Partner 
(SIGNATURE) (Full name in block capitals)

2. Account Details

This section of the Application form must be completed by the Administrators nominated by the Customer in respect of all the Originating Accounts of the Customer in respect of which the Services will be provided. Defined terms bear the meaning appearing in the Conditions of Use.

* Denotes mandatory fields that must be completed

Customer Name*

Address*

Company Email Address^{1*}

Telephone* Fax

Customer Administrator 1* (Block Capitals)
(as identified on page 2 section d)

Customer Administrator 2* (Block Capitals)
(as identified on page 2 section d)

The Administrator(s) must sign in the box at the bottom of this page.

Bank Contact Name/Relationship Manager

Principal Branch Name Principal Branch NSC

Administrator Mobile Phone Number for Business On Line Security Codes

Administrators Mobile Phone Country Prefix (please tick appropriate)

+353 +44 +1 other

Administrators Mobile Phone Number

The Administrator Mobile Phone number will be used when (1) An Administrator requires an activation code to begin their set up of the KeyCode solution and (2) The Administrator Mobile Phone number will be used for necessary service communications which shall include but not be limited to information on service changes, security, service disruption/outages, confirmation on amendments on BOL, application status, contact detail confirmation and payee authentication.

Daily Payment Control Limit

Daily Payment Control Limit

Your Daily Payment Control Limit is the maximum amount you can send to third parties on Business On Line in one day. It is an important control measure and you should set it to an appropriate figure for your payment requirements.

Confidential Administrator Details

The administrator(s) must complete the Administrator details application form(s) below. All details with the exception of the fax number are mandatory and must be completed.

Administrator 1 Details (as identified on page 2 section d)

Please complete and return with Legal Agreement.

Company Name	<input type="text"/>		
Administrator Name	<input type="text"/>		
Title	<input type="text"/>	Email address	<input type="text"/>
Work Mobile Number	<input type="text"/>	Fax	<input type="text"/>

I hereby confirm for your purpose the following information, which the Bank will use for identification purposes in dealing with me in my role as Administrator. **(Note: All five are mandatory)**

Date of Birth	<input type="text"/>
Middle Name	<input type="text"/>
Work Phone Number	<input type="text"/>
Mother's Maiden Name	<input type="text"/>
Home Address Post Code	<input type="text"/>

Note: For security reasons, these details should be kept private by you and returned to the Bank in a sealed envelope.

Administrator Signature 

Date

Confidential Administrator Details

The administrator(s) must complete the Administrator details application form(s) below.

Administrator 2 Details (as identified on page 2 section d)

Please complete and return with Legal Agreement.

Company Name	<input type="text"/>		
Administrator Name	<input type="text"/>		
Title	<input type="text"/>	Email address	<input type="text"/>
Work Mobile Number	<input type="text"/>	Fax	<input type="text"/>

I hereby confirm for your purpose the following information, which the Bank will use for identification purposes in dealing with me in my role as Administrator. **(Note: All five are mandatory)**

Date of Birth	<input type="text"/>
Middle Name	<input type="text"/>
Work Phone Number	<input type="text"/>
Mother's Maiden Name	<input type="text"/>
Home Address Post Code	<input type="text"/>

Note: For security reasons, these details should be kept private by you and returned to the Bank in a sealed envelope.

Administrator Signature 

Date

