

APPENDIX – ALLIANCE BizSmart PROFILE SETUP (please tick ☑ whichever applicable)										
ACCOUNT SETUP										
Company/Business Registered Name:										
I would like to have the following accounts accessible via Alliance BizSmart Online Banking Service ☐ All Accounts All accounts with Alliance Bank and Alliance Islamic Bank including Current & Saving Accounts/Current & Saving Accounts-i/Fixed Deposit/ Investment Account-i/Loan Accounts/Financing Accounts. ☐ Selected Accounts Only (Please State Account Numbers):										
Account number	Features av	Features available								
1.			☐ Inquiry	☐ Payroll	☐ Payn	nents	☐ Auto Debit	☐ Others		
2.	2.					nents	☐ Auto Debit	☐ Others		
3.	☐ Inquiry	☐ Payroll	☐ Payn	nents	☐ Auto Debit	☐ Others				
4.	☐ Inquiry	☐ Payroll	☐ Payn	nents	☐ Auto Debit	☐ Others				
5.	☐ Inquiry	☐ Payroll	☐ Payn	nents	☐ Auto Debit	☐ Others				
6.	☐ Inquiry	☐ Payroll	☐ Payn	nents	☐ Auto Debit	☐ Others				
7.	☐ Inquiry	☐ Payroll	☐ Payn	nents	☐ Auto Debit	Others				
8.	☐ Inquiry	☐ Payroll	☐ Payn	nents	☐ Auto Debit	☐ Others				
9.	☐ Inquiry	☐ Payroll	☐ Payn	nents	☐ Auto Debit	Others				
10.	10.				☐ Payn	nents	☐ Auto Debit	☐ Others		
FOR REALICITIES ONLY										
FOR BRANCH USE ONLY CIF No.:			Verified	by:						
Branch name:		Signature:								
Date received:										
FOR eBANKING OPERATION USE ONLY	FOR eBANKING OPERATION USE ONLY									
Company Key:			Proce	essed By			Approved	Ву		
		Date								

For Inquiry module only Name (in block letters):			
Name (in block letters)		1	
יימווים (ווו טוטטג וכננכוס).		User ID:	Group:
NRIC:	Mobile No. for TAC activation	:	
Access to features: ☐ All features ☐ Otherw	wise, please select feature(s):		
□ A	ccount Inquiry	ers (FX Rates)	
Account Linkage			
☐ All accounts			
☐ Account(s) number(s) specified below			
1)	3)	5)	
2)	4)		
Name (in block letters):		User ID:	Group:
NRIC:	Mobile No. for TAC activation		Собр
Access to features: All features Otherw		•	
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	ccount Inquiry	ers (FX Rates)	
Account Linkage			
All accounts			
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2)	·	·	
2)	4)		1
Name (in block letters):		User ID:	Group:
NRIC:	Mobile No. for TAC activation	:	
Access to features: ☐ All features ☐ Otherv	wise, please select feature(s):		
□ A	ccount Inquiry	ers (FX Rates)	
Account Linkage ☐ All accounts ☐ Account(s) number(s) specified below:			
1)	3)4)	·	
1)	·		
1)	4)	User ID:	Group:
1)2) Name (in block letters): NRIC:	4) Mobile No. for TAC activation	User ID:	
1)	Mobile No. for TAC activation wise, please select feature(s):	User ID:	
1)	Mobile No. for TAC activation wise, please select feature(s):	User ID:	
1)	Mobile No. for TAC activation wise, please select feature(s):	User ID: : ers (FX Rates)	
1)	Mobile No. for TAC activation wise, please select feature(s):	User ID: : ers (FX Rates)	Group:
1)	Mobile No. for TAC activation wise, please select feature(s):	User ID: : ers (FX Rates)	Group:
1)	Mobile No. for TAC activation wise, please select feature(s):	User ID: :ers (FX Rates) 5) User ID:	Group:
1)	Mobile No. for TAC activation wise, please select feature(s): account Inquiry	User ID: :ers (FX Rates) 5) User ID:	Group:
1)	Mobile No. for TAC activation wise, please select feature(s): account Inquiry Other 3) 4) Mobile No. for TAC activation wise, please select feature(s):	User ID: : ers (FX Rates) 5) User ID: :	Group:
1)	Mobile No. for TAC activation wise, please select feature(s): account Inquiry	User ID: : ers (FX Rates) 5) User ID: :	Group:

Name (in block letters):		User ID:	Group:
NRIC:	Mobile No. for TAC activation	:	
Role (Please tick one only):			
☐ Maker (Data Entry) ☐ Maker + Checker ☐ A	authoriser	☐ Maker + Authoriser ☐ M	laster Observer
Access to features:			
☐ All features ☐ Otherwise, please select feat	* *	_	
☐ Auto Debit ☐ Payroll	I ☐ Account Inquiry ☐ F	Payments \square Others (FX Ra	ites)
Account Linkage			
☐ All accounts			
Account(s) number(s) specified below:	0)		
1)	3)	•	
2)	4)		
Name (in block letters):		User ID:	Group:
NRIC:	Mobile No. for TAC activation	:	
Role (Please tick one only):			
☐ Maker (Data Entry) ☐ Maker + Checker ☐ A	uthoriser	☐ Maker + Authoriser ☐ M	laster Observer
Access to features:			
☐ All features ☐ Otherwise, please select feat	* *		
<u> </u>	I ☐ Account Inquiry ☐ F	Payments	ites)
Account Linkage			
All accounts			
Account(s) number(s) specified below:	0)	51	
1)	3)	•	
2)	4)		
Name (in block letters):		User ID:	Group:
	l		
NRIC:	Mobile No. for TAC activation	:	
Role (Please tick one only):	I		
	I		laster Observer
Role (Please tick one only): Maker (Data Entry) Maker + Checker Access to features:	I		laster Observer
Role (Please tick one only): Maker (Data Entry) Maker + Checker A Access to features: All features Otherwise, please select feat	authoriser	☐ Maker + Authoriser ☐ M	
Role (Please tick one only): Maker (Data Entry) Maker + Checker A Access to features: All features Otherwise, please select feat Auto Debit Payroll	authoriser		
Role (Please tick one only): Maker (Data Entry) Maker + Checker A Access to features: All features Otherwise, please select feat Auto Debit Payroll Account Linkage	authoriser	☐ Maker + Authoriser ☐ M	
Role (Please tick one only): Maker (Data Entry) Maker + Checker A Access to features: All features Otherwise, please select feat Auto Debit Payroll Account Linkage All accounts	authoriser	☐ Maker + Authoriser ☐ M	
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AUTHORISER(S) & AUTHORISATION RULE/CONDITION (applicable for Transaction Module only)

If authorisation rule is for all transactions in Alliance BizSmart, please fill in below:												
Transaction		Transaction	Limit	Approval Level								
Туре	Levels	From (RM)	To (RM)	Checker			Authorisers	sers				
	1			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
For All Transactions	2			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
	3			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
Otherwise, plea	se indica	ite authorisatio	ons rule for ea	ach product t	ype below:							
Transaction		Transaction I	Limit	Approval Level								
Туре	Levels From (RM) To (RM)			Checker			Authorisers					
Payments				•								
-	1			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
Pay to Alliance Accounts	2			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
7100001110	3			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
Pay to Accounts in Other Banks	1			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
	2			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
Gurer Barme	3			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
	1			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
RENTAS	2			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
	3			☐ Yes	Group:	□and □or	Group:	□and □or	Group:			
	1			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
Loan /Financing	2			☐ Yes ☐ No	Group:	□and	Group:	□and □or	Group:			
Repayment	3			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
	1			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
Bill Payment	2			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
	3			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
Bulk Paymen	ts	1			1	1 1		1				
-	1			☐ Yes ☐ No	Group:	□and □or	Group:	□and □or	Group:			
Bulk Payment	2			☐ Yes	Group:	□and	Group:	□and □or	Group:			
-	3			☐ Yes	Group:	□and □or	Group:	□and □or	Group:			

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	1			Yes	Grou	ıp:	□and	Group:		□and	Group:
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Payroll 2				☐ Yes ☐ No	Giot	ıp.	□and □or	Group.		□and □or	Group.
				☐ Yes	Grou	up:	□and	Group:		□and	Group:
			☐ No		· 	□or			□or	<u> </u>	
4			☐ Yes	Grou	ıp:	□and	Group:		□and	Group:	
	1			□ No			□or			□or	
KWSP 2		,		☐ Yes	Grou	ıp:	□and	Group:		□and	Group:
I KWOI	_			□ No			□or			□or	
	3			Yes	Grou	ıp:	□and	Group:		□and	Group:
			□ No		Group:		□or	Group:		□or	Group:
	1			☐ Yes ☐ Gro		ıρ.	□and □or	Group:		□and □or	Group.
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	3			□ No			□or			□or	
	1			☐ Yes	Grou	ıp:	□and	Group:		□and	Group:
SOCSO	'			□ No			□or			□or	
	2			Yes	Grou	ıp:	☐and ☐Group:			□and	Group:
			□ No		Grou	ın:	□or	Group:		□or	Group:
3			☐ Yes	☐ Yes ☐ Gloup		□and □or	Gloup.		□and □or	Group.	
Cheque Management							0.				
Stop Cheque				□ Yes	☐ Yes Group		□and	Group:		□and	Group:
Payment	1			□ No		·	□or	<u> </u>		□or	<u> </u>
Cheque Book	1			☐ Yes	Grou	ıp:	□and	Group:		□and	Group:
Request	ı		□ No			<u> </u>	□or			□or	
I/We confirm t	hat I am/	we are d	uly authorised l	by the compa	ny/busine	ss to sign	this applicat	tion form f	or and o	n its beha	lf
Signature											
Date:		Date:						Date:			
Ciamatura Nama			Signatu					Name:			
Signature Name:				Signat				Name:			
								Date			
Date:									Date:		
Company/Business Stamp:											