

## **Business Online Banking Enrollment Form**

ompany N	ame:				Business Tax ID			
Company Address:				City:	Duomoco Tux ID			
State:	MA	Zip Code:		Business Phone				
rimary Co		Zip oode.		E-Mail Address:	•			
Select Or ☐ Base		ing Package		download e-Statem	ents at no charge			
─ ☐ Bill Pay								
<b> </b>		•		Jser:	-			
	שלו די מי	y Admin design	ate only one c	, , , , , , , , , , , , , , , , , , ,	<del></del>			
Account Information  Account Number		n: Please list the accounts you  Access Level Acc		count Type	Access Level:			
					<ul><li>View Only</li><li>Full</li></ul>			
					<ul> <li>Deposit Only</li> </ul>			
					Account Types:			
					<ul><li>Checking</li></ul>			
					<ul><li>Business Money Fund</li><li>CD</li></ul>			
					Line of Credit			
					■ Loan			
					BRANCH USE CSR#			
				ı				
Please no		-1-" ":" b1-	a alven the	himboot lovel of a				
					account access provided to the unt permissions/rights to users			
	dministrato		•					
	rofile 1: (re	equired)						
Name:			Busin					
	E-Mail Address:		Mobile Ph		no:			

User Profile 2: (c	ptional)			
Name:			Business Phone:	
E-Mail Address:			Mobile Phone:	
Assign Administrator	_	s 🗌 No		
User Profile 3: (o	ptional)		Business Bhans	
Name:			Business Phone:	
E-Mail Address:			Mobile Phone:	
Assign Administrator	Rights?	s 🗌 No		
User Profile 4: (c	ptional)			
Name:			Business Phone:	
E-Mail Address:			Mobile Phone:	
Assign Administrator	Rights?	s 🗌 No		
User Profile 5: (c	ptional)			
Name:			<b>Business Phone:</b>	
E-Mail Address:			Mobile Phone:	
Assign Administrator	Rights? ☐ Ye	s 🗌 No		
A Login ID will be ser	nt via secure email to indiv	/idual user	s at the email address	ses provided.
	ny User assigned administ selected, Users with admin			rity to add new Users. If it authority to add new
Permit Users with Adn	ninistrator Rights to Add U	Jsers?	☐ Yes ☐ N	lo
Authorization:				
that Users assigned a authorized above, ad	administrator rights are al Iministrators have the aut I to accept the Online Ban	ble to assi thority to a	gn user rights to the and do new users. All us	viduals listed. I understand Accounts. Additionally, if so sers assigned administrator e Company upon their initial
Print Name	Signature of Author			Date

To complete this enrollment, please sign and bring to any branch location, fax to 508-389-9385 or mail to: **Middlesex Savings Bank, Online Banking Department, PO Box 5210, Westborough, MA 01581.** If you have any questions, please call **1-877-463-6287**.