



Business Online Banking Modification Form

Company Name: _____

Date: _____

Please check box (and complete the appropriate section of the form, if applicable) if requesting a change from the original enrollment form:

- Add//Modify/Delete User
- Add/Modify/Delete Account
- Add Bill Pay Bill Pay Admin designate only one User _____
- Delete Bill Pay
- Enable Admin to Add Users (complete page 2)

Please note:

Users with administrator rights are given the highest level of account access provided to the Company. Administrators are responsible for assigning account permissions/rights to users without supervisor rights.

Users:

- Add/Modify User
- Delete User

Name:		Business Phone:	
E-Mail Address:		Mobile Phone:	

Assign Administrator Rights? Yes No

- Add/Modify User
- Delete User

Name:		Business Phone:	
E-Mail Address:		Mobile Phone:	

Assign Administrator Rights? Yes No

- Add/Modify User
- Delete User

Name:		Business Phone:	
E-Mail Address:		Mobile Phone:	

Assign Administrator Rights? Yes No

Accounts:

Access Types:

View Only
Full Access
Deposit Only

Account Types:

Checking
Business Money Fund
CD
Line of Credit
Loan

Account #	Access Type	Account Type

Add modify delete

Add modify delete

Add modify delete

Add modify delete

Add modify delete

If you select "yes", any User assigned administrator rights shall have the authority to add new Users. If it is left blank, or no is selected, Users with administrator rights shall not have the authority to add new Users.

Permit Users with Administrator Rights to Add Users? Yes No

Authorization:

By signing below, I authorize access to the Online Banking Service for the individuals listed. I understand that Users assigned administrator rights are able to assign user rights to the Accounts. Additionally, if so authorized above, administrators have the authority to add new users. All users assigned administrator rights will be required to accept the Online Banking Agreement on behalf of the Company upon their initial login to Online Banking.

Print Name

Signature of Corporate Officer/
Company Owner

Date

*To complete this Modification, please sign and bring to a 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.***