Cash Management Online Banking

Admin-User Setup Form

Website: www.fb247.com
Email: info@fb247.com

First Bank & Trust Co.
Member FDIC

Accounts to be set-up on Online Banking (NO DUPLICATE NAMES):

☐ Check here if requesting access to all accounts shown on CIF.

◉ NEW
○ ADD
○ DELETE

Account Number	Title on Online Banking	Set as Online Bill Pay Acct
123456 (example)	Household Checking (example)	☑
		☐
		☐
		☐
		☐
		☐
		☐

"I", "We" authorize First Bank & Trust Co. to set up the following accounts for funds transfer on Online Banking. I understand and take responsibility for the security of my Online Banking ID and PIN number. I also take responsibility for reporting the loss/theft of my Online Banking ID and/or PIN number immediately to First Bank & Trust Co. I also understand that I have the ability to activate the Online Bill Pay service and pay bills from the checking account(s) listed above. I authorize First Bank & Trust Co. to post payment transactions generated by Personal Computer (PC) or Mobile Device from the Online Bill Pay service to the account(s) listed above. I understand that I am in full control of my account. If at any time I decide to discontinue service, I will provide written notification to the Bank. My use of the Online Banking Service signifies that I have read and agree to the Online Banking Agreement provided by First Bank & Trust Co. on the website at www.fb247.com. My use of the Online Bill Pay Service signifies that I have read and accepted all the terms and conditions of this service.

I understand as the ADMINISTRATIVE user for listed company or companies, that I will be responsible for security procedures administered to any and all Sub-Users created by myself or another appointed Administrative user. Administrative users will create sub-users within the discretion of what is needed to operate within guidelines of appointed Administrative user. Administrative users will also be responsible for the upkeep of any and all Sub-Users within the company. Sub-Users are to report to Administrative users for access rights, privileges and password resets. Administrative users MUST be an authorized signer on ALL accounts.

I UNDERSTAND that sufficient time must be allowed for the post office to deliver payments made by check and that 3 - 4 days should be allowed for electronic payments. My financial institution is not liable for any service fees or late charges levied against me. I also understand that I am responsible for any loss or penalty that may incur due to lack of sufficient funds (NSF fee $30.00) or other conditions that may prevent the withdrawal of funds from my account(s).

I also understand that the Federal Government does not accept any payments made by a third party. All payments I set up to the IRS or *any other government entity will be deleted.*

E-Mail Address

Signature of Authorized Party **Date** (_____/_____/_____)

Print Name **Daytime Phone #** _____

**Remember your temporary password for Online Banking is the last 4 digits of your Tax ID Number.

FOR BANK USE ONLY

CIF Number:_____ **Online Banking ID Number:**_____ **Entered By:**_____

Date Received: (/ /) **Date Entered:** (/ /) **Checked By:**_____