

A. BUSINESS INFORMATION

☐ NEW ☐ EXISTING: Corporate Code: _____

A1. Business Name _____

A2. City of Incorporation _____ A3. Country of Incorporation _____ A4. Date of Incorporation or Registration _____

A5. Contact Person (Recipient of all billings and bank notices)

Full Name _____

(Last Name, First Name, M.I.) _____ E-mail Address _____ Mobile Number _____

Fill in account numbers to be enrolled in BizLink and tick one to nominate as a Settlement Account. This is where applicable fees, service fees, and maintenance fees will be debited from.

[illegible]

C1. Check only one* ☐ Any 1 ☐ Any 2 ☐ Any 3 ☐ Others, please specify: _____

FACILITIES	DESCRIPTION	TRANSACTION FEE
Account Inquiry, Transaction History, Statement of Account	Inquire and view your account balances and transactions	Free
Transfer to Own Accounts	Transfer funds from one company account to another	Free
Pay Bills	Pay bills to over a hundred merchants online with no pre-enrollment of merchants required	Free
Mobile Check Deposit	Deposit a check to the company's own account.	Free
Pay BPI Accounts	Electronically pay your service providers and suppliers with BPI accounts	Free
Government Payments (refer to the table below for the required information¹)	Pay dues owing to BIR, SSS, PhilHealth, and Pag-IBIG	Free
Foreign Exchange (For RM endorsement)	Buy/sell foreign currency without additional required documents	Free
Pay Non-BPI Account (PESONet)	Transfer funds to other local banks within the day, for up to a limited transaction amount	Free
Pay Foreign	Transfer funds to foreign accounts anywhere in the world	\$14.00
Pay to Other Banks via RTGS	Transfer funds to other local banks within the hour, without a transaction amount limit	Php 500.00
Pay to Other Banks via GSRT	Transfer dollar funds to dollar accounts in other local banks	\$10.00

¹Government Payment Details																															
BIR (12-digit Tax ID No.)				-				-			-				SSS (10-digit Employer ID No.)								-						-		
Pag-IBIG (12-digit Employer ID No.)		-								-					+ Pag-IBIG MSB Code (4-digit code)																
PhilHealth (12-digit Employer ID No.)			-								-																				

The COMPANY authorizes the BANK to debit or cause the debiting of the COMPANY's SETTLEMENT ACCOUNT for all applicable fees, service charge/ maintenance fees and/or amount due to the BANK in accordance with the policies and procedures prescribed by the BANK without need of further notice. All applicable fees, including the service fee and/or maintenance fee, due for the covered month shall be debited from the SETTLEMENT ACCOUNT on the 25th day of the succeeding month. The applicable fees, service fees, and/or maintenance fees shall be subject to periodic review by the BANK. The BANK reserves the right to change the applicable fees, service fees, maintenance fees, and/or required collateral business upon written notice to the COMPANY.

Withholding tax obligations, if any, on the amounts payable to the BANK shall be the responsibility of the COMPANY. In the event that the COMPANY is required by law to make a withholding or deduction, the COMPANY will make relevant payments to the BANK net of the withholding or deduction, which withholding or deduction shall be at the time and in the manner required by law and pertinent regulations and issuances. The COMPANY will provide documents or information as may be required by the BANK to verify the appropriateness of withholding or deduction. Where applicable, the COMPANY shall provide the BANK with the appropriate certificate of tax withheld, in accordance with the existing rules of the BIR, as proof of withholding of the applicable tax. The certificate will be provided to the BANK within reasonable time allowed by the Philippine tax laws and regulations. The BANK may require the return of any amount withheld or deducted if the withholding or deduction and/or the issuance of the certificate was not in accordance with law or regulations.

Online Banking Administrators <i>(Required field)</i>	SYSTEM ADMINISTRATOR ENCODER Creates request to change BizLink set-up such as adding/deleting Transactional Users as well as savings/checking accounts, updating government ID numbers for Government Payments facility, and enrolling in additional facilities.	SYSTEM ADMINISTRATOR APPROVER Approves requests for changes in BizLink set-up and accepts the terms and conditions governing the Facilities.	
	Full Name*		
	(Last Name, First Name, Middle Name)		
	Email Address*		
	Mobile Number*		
Tax Identification Number*	- - -	- - -	
	☐ Also enroll as Transactional Maker	☐ Also enroll as Transactional Authorizer	
Transactional Users <i>(Optional field)</i>	TRANSACTIONAL MAKER Views accounts and reports, and creates transactions.	TRANSACTIONAL AUTHORIZER Views accounts and reports, and approves transactions.	
	Full Name*		
	(Last Name, First Name, Middle Name)		
	Email Address*		
	Mobile Number*		
Tax Identification Number*	- - -	- - -	

By signing this form:

1. I/We confirm the validity and accuracy of all information provided to the BANK. I/We acknowledge that I/we understand the Facilities I/we have enrolled in and/or availed of on behalf of the COMPANY, and agree to pay the applicable fees imposed or that may hereinafter be imposed by the BANK for the COMPANY's use of such Facilities.
2. I/We acknowledge that I/we have read, understood and accepted all the terms and conditions contained in all the pages of the Cash Management Agreement and Supplemental Terms and Conditions, including the annexes, if any, (and each amendment and supplement thereto) which govern the COMPANY's use of the Facilities (copy/ies of which are readily viewable, made available and/or downloadable from the BANK's website (www.bpi.com.ph) and deemed incorporated herein by reference) (collectively, the "Agreement"), all of which accurately reflect the COMPANY's intent and agreement.
3. The COMPANY's continued use and availment of the BANK's Facilities shall constitute its acceptance of any modifications, amendments, supplements or revisions to the Agreement.

Bank of the Philippine Islands is regulated by Bangko Sentral ng Pilipinas. <https://www.bsp.gov.ph>

Authorized Signatories: _____ **Date Signed** _____

Name & Signature of Authorized Signatory* | Designation*

Name & Signature of Authorized Signatory* | Designation*