

**Authorization/Application for the Appointment of an Authorized Person**

This application is to be completed if you wish to authorize a third person to have access to your accounts through the **1bank** Service (internet, telephone, mobile phone). The Authorized Person will have access to your accounts through his/her own User ID and Passcode. For each Authorized Person you must complete a separate application. **It is clarified that in order for the Authorized Person to have Full Access to joint accounts, it is necessary for this application to be signed by all the account holders.**

**How to complete the Application Form**

- Please read the 1bank Terms and Conditions carefully
- The definitions for the meaning of words and phrases included in the application are explained in the Terms and Conditions.
- Please complete all paragraphs and make sure that your selection is marked in all required sections.

**APPLICANT PERSONAL INFORMATION**

Full Name:.....	
ID Card/Passport Number.: .....	Contact Phone: *:.....
* for this application purposes only	

**INFORMATION OF AUTHORISED PERSON**

User Name: .....	
ID Card/Passport Number.: .....	User ID: .....

**ACCOUNTS TO BE CONNECTED**

- A     i. All accounts with the Bank of Cyprus Group (please circle)  
       or   ii. The following accounts

<b>YES/NO</b>
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.....	.....	.....	.....
.....	.....	.....	.....

- B. Automatic Connection of all Future Accounts (please circle)

<b>YES/NO</b>
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**ACCESS LEVELS/SERVICES PROVIDED**

Select your choice (please circle):

<b>ALL SERVICES*/INFORMATION ONLY**</b>
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**\*ALL SERVICES** = carry out transactions and retrieve information

**\*\*INFORMATION ONLY** = retrieve information regarding your transactions, the balance of an account, cheque imaging

A list with complete details regarding the Services offered is available at any branch of the Bank and/or at the Bank's website [www.bankofcyprus.com.cy](http://www.bankofcyprus.com.cy)

**Important Information**

1. Should you choose to give the Authorized Person access to All Services, he/she will be allowed to transfer money from your accounts to any other account he/she chooses based on his/her daily transfer limits. The Authorized Person may modify these limits at any time.
2. The Services mentioned in this application in relation with the access levels are indicative only and are not an exhaustive list of services offered. Services that may be introduced in the future will be offered automatically to the Authorized Person according to the access level/Services you choose.

**DIGITAL SIGNATURES**

This document may be signed either by hand or with the use of approved electronic signatures within the meaning of Regulation (EU) No 910 / 2014 of the European Parliament and of the Council of 23rd of July 2014 on electronic identification and trust services for electronic transactions in the internal market and Law 55 (I) / 2018 as these are amended or replaced from time to time.

In addition, the signatory(ies) agree(s) and accept(s) that this document may be executed and delivered in counterparts, each of which shall be deemed an original, all of which, after being signed, shall be placed together by the Bank of Cyprus Public Company Ltd and will be considered as a complete document.

**DECLARATION**

- I/we hereby authorize the Bank to accept instructions from the Authorized Person in relation to my/our Account(s) listed above in accordance with the access levels I/we have selected above.
- Where I/we have selected ALL SERVICES above, I/we understand that the Bank will debit my/our Account(s) listed above in accordance with instructions given by the Authorized Person.
- I/we understand that the Terms and Conditions of **1bank** apply, which I/we have received before signing this application and can also be found on the website [www.bankofcyprus.com.cy](http://www.bankofcyprus.com.cy)
- I/we undertake to inform the above authorized person that he/she can be informed about the processing of his/her personal data, his/her rights as well as other important information regarding the security and use of his/her data at the Bank, by referring him/her to the Bank's Privacy Statement which is available at any branch of the Bank and/or on the website [www.bankofcyprus.com.cy](http://www.bankofcyprus.com.cy)
- I/we confirm that the information given by me/us in this application is accurate, true and complete.

This authorization shall remain valid until revoked by myself/ourselves in writing or by a new authorization.

Applicant(s) signature(s): .....

Date:.....

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<b>FOR INTERNAL USE (Branch)</b>	
Applicant CIF: .....	Stamp & Signature: .....
Branch Number: .....	Date .....