

Customer Acknowledgment Slip

Originating Branch: _____

CIS Officer's Name: _____ Staff ID No.:

Signature: _____ Date:
Day Month Year

Kindly tick transaction carried out in the banking hall below:

Transaction Alert Internet Banking Access Account Aggregation Pre-Registered Transfer

Pre-Registered Transfer

For frequent transfer with specified with limits, please tick required section as appropriate

Beneficiary Name: _____

Account No.: Transfer Limit:

Beneficiary Name: _____

Account No.: Transfer Limit:

Beneficiary Name: _____

Account No.: Transfer Limit:

Available Services

Services available on the Internet Banking platform includes: Balance Enquiry, Inter/Intra bank transfers(Local and International), Cheque Confirmation, Bill Payment, Airtime Purchase, Card Request (transfer or hotlist), other services can be added by selecting the 'Self Service' option.

Customer Responsibility

You hereby agree to take responsibility for protecting an ensuring the safety of your user login profile (user ID and password) at all times. Registration for the Internet Banking Services is for a single user only; you must not permit other persons to use your login profile nor disclose your details to third parties. GTBank will not be liable for losses arising from un-authorized access to/ or use of your account arising from negligence or failure to safeguard and protect your user login profile or any other customer information protection device or functionality provided by the bank to facilitate confidentiality, integrity and accuracy of your data and online transactions.

Service Access

Your access to the Internet Banking service may be suspended at any time without notice to maintain the integrity of this service or in instances of system maintenance or failure, or for any reason thebank's control. GTBank also reserves the right to temporarily or permanently change, modify or discontinue this service at anytime without notice. You hereby agree that GTBank would no be liable to you or any third party for the exercise of the exercise of these rights of suspension, modification or discontinuation.

 Authorised Signatory

 Authorised Signatory

For Official Use

CIS: _____
 Name/Signature/Date

OPS Head: _____
 Name/Signature/Date