

| | | |
|------------------------------|--|--|
| Delegate Information: | <input type="checkbox"/> Edit Delegate (PU Only) | <input type="checkbox"/> Remove Delegate (PU Only - complete sections 1 and 4) |
|------------------------------|--|--|

| Section 1: Delegate Details | | |
|--|---|--------------------|
| Customer Name*: | Mailing Address, Postal Code, City and Country* | |
| Delegate Name*: | | |
| Delegate Classification: <input type="checkbox"/> Primary User <input type="checkbox"/> Secondary User | | |
| Contact e-mail address: | Telephone Number: | Facsimile Number: |
| Date of Birth* (mm/dd/yyyy): | ID Type*: | ID Number*: |

| Section 2: Delegate Limits | | |
|---|-------------------------------------|-------------|
| Transaction Category | Delegate Daily Limit ⁽¹⁾ | Bank Limits |
| Transfer to a pre-designated payee ⁽²⁾ | | 3,000,000 |
| Transfer to a non-designated payee ⁽³⁾ | | 500,000 |
| Inter-account Transfer | | 5,000,000 |
| Bill payment | | 100,000 |
| Local bulk (ACH) Payment ⁽⁴⁾ | | 500,000 |
| All transaction total ⁽⁵⁾ | | 9,100,000 |
| ⁽¹⁾ The Daily Limit cannot be greater than the listed Bank Limits ⁽²⁾ Pre-designated payees are created by the Bank at your request ⁽³⁾ Non-designated payees are created by the Applicant via BIB ⁽⁴⁾ Bulk payment (multiple credits to local bank payees) which is requested by the user. ⁽⁵⁾ Maximum dollar value of all transactions which can be instructed daily by a company or user. | | |

| Distribution of Security Credentials (PIN Advice and Security Device): | |
|---|---|
| In Bermuda Mail: | |
| To send security credentials to address above. | Please tick here <input type="checkbox"/> |
| In Bermuda Pick -Up: | |
| To arrange for security credentials to be picked up at Bank of Bermuda, Church Street Branch. | Please tick here <input type="checkbox"/> |
| International: | |
| Security credentials will be sent to address above. | |

| Section 4: Signatures (On behalf of the Customer) | | |
|---|--------------|------|
| Signature * | Printed Name | Date |
| Signature | Printed Name | Date |

| For Bank Use Only | | |
|---|-----------|------|
| Delegate Change Form received and checked by: | | |
| Printed Name | Signature | Date |