

All fields to be completed in BLOCK LETTERS. Please indicate "N.A." where inapplicable.

1. Business Details	
Corporate Name	
Business registration number ¹	
Name of contact person ²	
Corporate email	
Office / Mobile Phone	+ Country Code
Primary corporate account for us to deduct Reflex related fee (if applicable) 2. Business Accounts Details	Currency
All accounts Additional / Specified accounts	listed below only
	Currency
	Currency
	L L L L L L L L L L L L L L L L L L L
	L Currency
	Currency
	Currency

Approving Person(s) Init	ial
Sign here	Sign here

¹ As per Business Registration License

² You are authorised to receive communications from us and to communicate your company's information to us



3. User Information Details

USER 1

Please read the notes below before filling up the appropriate section

- Inquirer: View account details only
- Administrator: Able to perform user security administration
- Administrator + Financial Transaction: Perfrom User Security administration + create or approve transactions
- Maker: Create transactions
- Reviewer: Review transactions submitted by Maker
- Authoriser: Approve transactions

User ID ¹ Full Name ² I
Full Name ²
National ID / Passport No.
Mobile Number ³ +
Country Code Designation
Corporate email ⁴
Select ONE user role Inquirer Administrator 1 (maker) Administrator 1 (maker) with Financial Transactions Single Control Access (This same user will initiate and approval all transactions)

Optional to add Inquirer only.

Approving Person(s) Init	tial
Sign here	Sign here

¹ Min 6-18 characters with no space or special character

² As per National ID / Passport

³ Required to receive SMS notifications

⁴ Required to receive email notifications



3. User Information Details

USER 2

Please read the notes below before filling up the appropriate section

- Inquirer: View account details only
- Administrator: Able to perform user security administration
- Administrator + Financial Transaction: Perfrom User Security administration + create or approve transactions
- Maker: Create transactions
- Reviewer: Review transactions submitted by Maker
- Authoriser: Approve transactions

User ID ¹		
Full Name ²		
National ID / Passport No.		
Mobile Number ³	+ Country Code	
Designation		
Corporate email ⁴		

Select ONE user role
Inquirer
Administrator 2 (maker)
Administrator 2 (maker) with Financial Transactions
Single Control Access (This same user will initiate and approval all transactions) Optional to add Inquirer only.

Approving Person(s) Init	tial
Sign here	Sign here

¹ Min 6-18 characters with no space or special character

² As per National ID / Passport

³ Required to receive SMS notifications

⁴ Required to receive email notifications



3. User Information Details

USER 3

Please read the notes below before filling up the appropriate section

- Inquirer: View account details only
- Administrator: Able to perform user security administration
- Administrator + Financial Transaction: Perfrom User Security administration + create or approve transactions
- Maker: Create transactions
- Reviewer: Review transactions submitted by Maker
- Authoriser: Approve transactions

User ID ¹				L	L		L	I		L	I		L			L		L									
Full Name ²						Ī	I	I			I													L	L	L	
		ı	I				ı	I			I	I												L		L	
National ID / Passport No.		ı	I									I	I			I		I	I					L	L	L	I
Mobile Number ³	+	1	1	1			1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	ī	ī	1	1		1

Designation	Cou	ntry I	Cod	le L							1	1	1					1			1				1	1	
Corporate email ⁴		L	l	ı	l	1	l	1	1	l	l	l	l	L	ı	I	l	I	l	l	l	ı	l	l	ı	l	
Select ONE user role																											

Inquirer (Optional)	
Reviewer (Optional)	
Maker	
Authoriser	

Approving Person(s) Init	tial
Sign here	Sign here

¹ Min 6-18 characters with no space or special character

² As per National ID / Passport

³ Required to receive SMS notifications

⁴ Required to receive email notifications



3. User Information Details

USER 4

Please read the notes below before filling up the appropriate section

- Inquirer: View account details only
- Administrator: Able to perform user security administration
- Administrator + Financial Transaction: Perfrom User Security administration + create or approve transactions
- Maker: Create transactions
- Reviewer: Review transactions submitted by Maker
- Authoriser: Approve transactions

User ID ¹	L	L		L	L	L	L	L	L	L	L			L	L	L	L									
Full Name ²				L	L	L	L	L	L	L	L			L					L	L			L		L	
				L	L	L	L	L		L	L			L	L	L		L	L	L			L		L	
National ID / Passport No.				L	L	L	L	L		L	L			L	L	L	L	L	L	L	L		L	L	L	I
Mobile Number ³	+ L Coun	l itry (Code	e e		L	L	L	L	ı	ı		L	L			ı	L	L	L	L		L	L	L	
Designation		Ĺ		L			L	L		L	L								L	L	ı		L	I	L	
Corporate email ⁴		L			L	L	L	L	L	L	L	L	L	I	L	L	L	L	L	I	L	L	L	L	L	I
		1	L	L	L	L			L					L			1	L	I	1	L			L		
Select ONE user role																										
Inquirer (Optional)																										
Reviewer (Optional)																										
Maker																										
Authoriser																										

Approving Person(s) Init	tial
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Authorisation Mandate

Combination of Authoriser grouping (s)

eg. 2A + 1B (2 Group A authorisers + 1 Group B authorisers)



Approving Conditions for Single Control Acc	cess	
Single Authoriser		
Approving Conditions for Dual Control Acce	ess	
Any 1 authoriser required to approval a	transaction OR	
Any 2 authoriser required to approval a (Please specify minimum 2 authorisers)		
Cutomised transaction signing (Please specify minimum 2 authorisers)		
Customised Setup (Dual Access Control Applica Please read the notes below before filling up t		on
Authorisation Grouping		
Indicate the grouping alphabets eg. A, B, C etc. User Name	Group	1
oser Name	G. Gup	
		ı

	Transact	tion Limit			Sequential authorisation
F	rom	F	rom	Authorisation mandate	(Tick if applicable)
Currency	Amount	Currency	Amount		(Tick if applicable)

Sequential Authorisation

eg. Priority 1: 2A + Priority 2: 1B or Priority 1: 1C

or 1 Group C can approve to complete)

(2 Group A must approve before 1 Group B to complete;

Approving Person(s) Init	tial
Sign here	Sign here

RHB Reflex Application Form

Business Internet Banking



4. Agreement

To be signed only by person(s) approved in Letter of Authorisation (LOA) to apply for banking services

- 1. Authorise and agree for all service fees to be debited from my/our account(s) with the Bank. Note:
- The subscription and service fees shall be debited from your account upon issuance of your Corporate ID/ Organisation
- The service fee is charged on each transaction and shall be debited from your account upon processing of your payment files
- The training fee is levied every time a training session is conducted at your site and shall be debited from your account upon completion of training.
- The subscription, service, token, and trianing fees mentioned above are non-refundable.
- Token charge is applicable for replacement of lost or damaged tokens.
- All fees/charges incurred will be subjected to the prevailing tax (where applicable).
- 2. Confirm that the person(s) whose information is/are provided in this form is/are authorised to perform and effect all transactions and services for and on my/our behalf and all such transactions shall be binding and conclusive on me/us.
- 3. Agree to the collection, use and disclosure of the information provided herein and any other information provided to or obtained by the Bank from time to time for the purposes as set out in the Bank's Terms and Conditions Governing the use of RHB Reflex.
- 4. Are authorised to act for and on behalf of the Corporate/Associate/Club/Society/Partnership/Limited Partnership/Limited Liability Partnership to apply for the RHB Reflex provided by the bank.
- 5. All information provided herein and any documents submitted are true, correct and complete.
- 6. Have read, understood and agreed to abide and be bound by the bnak's terms and conditions, this Application Form and RHB Reflex Terms and Conditions made available on www.rhbgroup.com/cambodia as may be amended, varied supplemented, substituted and/or replaced by the Bank from time to time
- 7. In the case of dual access or control ("Dual Control"), two or more people are required to be actively involved in order to complete a transaction. This involves having a person responsible for initiating or creating the transaction and another individual of higher authority to approve the transaction in the system. In the case of single access or control ("Single Control") only one person is required to complete a transaction. For all transactions initiated through RHB Reflex, the system defaults to have Dual Control in place as account fruad and identify theft are frequently the result of Single Control.

For more details on RHB Reflex Terms and Conditions and service fees applicable, please visit www.rhbgroup.com/cambodia

Approving Person(s) Init	tial
Sign here	Sign here

RHB Reflex Application Form

Business Internet Banking



The following clause is applicable for selecting Single Control Access

8. I/We fully understand and acknowledge the characteristics and risks of having Single Control, which carries risk of compromise when compared with the benefit of Dual Control Access, which provides an extra layer of security. I/We hereby authorize RHB Bank (Cambodia) Plc. To proceed with Single Control Setup in RHB Reflex. I/We shall assume and be responsible for the risks inherent in Single Control Access. I/We undertake to indemnify and hold the bank fully indemnified from and against any loss, costs (including solicitor and client costs on a fully indemnity basis), charges, damages, claims, demands, actions, proceedings and all other liabilities of whatever nature however incurred or suffered by me/us or the Bank as a result of the Bank agreeing to act on my/our said authorization.

Approving Person		
	Name	
Signature		
	National ID/Passport No.	
	Date	
Approving Person		
	Name	
Signature		
	National ID/Passport No.	
	Date	



Cost Center		Remarks/Sales or Campaign Code (if applicable)
Branch Code		
Completed RHB Ref	ex Application Form	
RHB Reflex Boar	d Resolution (Corporate)/Letter of Author	rization (Individual)
RHB Reflex Lette	er of Offer (accepted and signed by custon	ner)
Certified true co	py of National ID / Passport of named RH	B Reflex Authoriser(s) in this application.
	py of documentary proof of residential ac within 3 months) - <i>For hard token only</i>	ddress of named RHB Reflex Authouriser(s) in this application
Name screening	of Reflex Authoriser(s) - (must be dated v	vithin 1 month)
If company's subsidi	ary account(s) are to be tagged to the cor	mpany (main applicant), please provide:
Subsidiary board	l resolution	
Director listing		
Attended by		
Signature		Staff Name
		Staff ID
		Staff ID
6. Bank use - For Or	boarding Team	Staff ID
6. Bank use - For Or Application ID	boarding Team	Staff ID
Application ID	boarding Team	Staff ID
	boarding Team	Staff ID
Application ID	boarding Team	Staff ID
Application ID	boarding Team	Staff ID
Application ID Remarks	boarding Team	Staff ID
Application ID Remarks Processed by	boarding Team	Staff ID Date
Application ID Remarks Processed by	boarding Team	Staff ID Date Staff Name
Application ID Remarks Processed by	boarding Team	Staff ID Date Staff Name Staff ID
Application ID Remarks Processed by Signature Verified by	boarding Team	Staff ID Date Staff Name Staff ID Date
Application ID Remarks Processed by Signature	boarding Team	Staff ID Date Staff Name Staff ID



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