

ADIB Direct - Direct Debit Registration Form

Customer Full Name _____
 Customer Account No. _____
 Charge Account No. _____
 Channel Manual ADIB Direct

For Direct Debit through Corporate Internet Banking (ADIB Direct)

User Information

Username	ADIB Direct User ID	DDA User Access
_____	_____	_____
_____	_____	_____
_____	_____	_____

Authorization Workflow (Only for Direct Debit)

"The subject matter of this Form shall be governed by and subject to the Terms and Conditions governing the Cash Management Services between us and Abu Dhabi Islamic Bank PJSC (ADIB)."

Authorized Person 1		Authorized Person 2	
Name _____	Name _____	Name _____	Name _____
Title _____	Title _____	Title _____	Title _____
Signature _____	Signature _____	Signature _____	Signature _____
Date _____	Date _____	Date _____	Date _____

For Bank Use Only

Received By	Signature Verification	Document Archival
Receiver Signature & Date _____	Maker Signature & Date _____	Archiver Signature & Date _____
Reviewer Signature & Date _____	Checker Signature & Date _____	Originator Identification Code (OIC) _____
Client Segment _____	RIM/GRIM Number _____	

