

# Application for the Use of Corporate Banking Service for Affiliate

☐ Corporate Banking(Integrated CMS)   ☐ CMS Plus   ☐ CMSiNet

To Hana Bank

## ■ Application

Application Type		<input type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Terminate	Location of Affiliate		<input type="checkbox"/> In Korea <input type="checkbox"/> Outside Korea
Principal Contractor	Corporate Registration No.		Business Registration No.		
	Company Name		Representative		
	Address				
Affiliate	Corporate Registration No.		Business Registration No.		
	Bank/Branch	(Only for a foreign client)		Global Client No.	(Only for a foreign client)
	Company Name		Representative		
	Address				
	Phone No.		Fax		
	e-mail	(Required to receive a notice of transaction details)			

※ For affiliates outside of Korea, contact the bank's overseas branch to check documents required and global client number.

## ■ Services

Inquiry Service (Within the scope of authority delegated)	<input type="checkbox"/> Entire: All transactions for the relevant affiliate including deposit, foreign exchange, export/import, loan, electronic payment, cards, giro/utility <input type="checkbox"/> Specific: <input type="checkbox"/> Deposit (Inquiry of <input type="checkbox"/> All accounts, <input type="checkbox"/> Accounts designated below only), <input type="checkbox"/> Foreign exchange, <input type="checkbox"/> Export/import, <input type="checkbox"/> Loan, <input type="checkbox"/> Digital payment, <input type="checkbox"/> Cards, <input type="checkbox"/> Giro/utility						
	Currency	Account No.	Account Holder	Currency	Account No.	Account Holder	
Payment Service (Withdrawal account)	Designate the affiliate's withdrawal account, as well as the principal contractor's executor ID* which conducts transactions for the affiliate ※ If a withdrawal account is not designated, it is only possible to view the affiliate's accounts.						
	Executor ID*	Currency	Account No.	Registered Seal/Sign	Currency	Account No.	Registered Seal/Sign
Affiliate's ID	Please fill out the following fields if the affiliate intends to conduct electronic banking transactions via the principal contractor's CMS Plus.						
	ID	(6- to 10-digit alphanumeric characters)				<input type="checkbox"/> Executor <input type="checkbox"/> OTP	
	Transfer Limit	KRW	per transfer	Bulk Transfer Limit	KRW	per transfer	
		KRW	per day		KRW	per day	
	Withdrawal Acct	Account No.	Registered Seal	Account No.	Registered Seal		
	* I/we agree to withdraw the OTP issuance fee from the following account. (Account No.:                      Account Holder                      Registered Seal)						
	ID	(6- to 10-digit alphanumeric characters)				<input type="checkbox"/> Executor <input type="checkbox"/> OTP	
	Transfer Limit	KRW	per transfer	Bulk Transfer Limit	KRW	per transfer	
		KRW	per day		KRW	per day	
	Withdrawal Acct	Account No.	Registered Seal	Account No.	Registered Seal		
* I/we agree to withdraw the OTP issuance fee from the following account. (Account No.:                      Account Holder                      Registered Seal)							
※ A request for a change of affiliate's ID can be made by the affiliate.							



Section for Online Printing

■ Consent to the Delegation of Authority and Affiliate's ID

Principal Contractor	<input type="checkbox"/> Consent to the Affiliate's Use of ID 1. I/we hereby agree that the affiliate use my/our electronic banking system in accordance with the 'Agreement for the Use of Corporate Banking Service for Affiliate' signed with the Bank. <div>Company Name Representative (registered corporate seal)</div>
Affiliate	<input type="checkbox"/> Consent to the Use of Accounts 1. I/we(affiliate) agree that the principal contractor uses the accounts within the authority delegated by me/us as specified in the above [Inquiry Service] and [Payment Service] sections in accordance with the 'Agreement for the Use of Corporate Banking Service for Affiliate' signed with the Bank(hereinafter the Agreement) 2. For money transfer from any account specified in the above [Inquiry Service] and [Payment Service] sections to another account, I/we agree that despite the Bank's Terms & Conditions for Deposit Transactions and other agreements, the Bank can withdraw funds under the Agreement without any payment order or check. <input type="checkbox"/> Consent to the Users under Control 1. I/we agree that my/our electronic banking users are granted the same authority as the Principal Contractor's in accordance with the Agreement. <div>Company Name Representative (registered corporate seal)</div>

I/we confirm that I have received an OTP (One Time Password). And I/we acknowledge the General Terms & Conditions for Electronic Financial Transactions stipulating that I/we shall not lend, delegate the use of, assign, provide as collateral, or leak any means of access for electronic banking transaction (OTP, password for digital certificate, user password, etc.) to a third party and shall extra caution to prevent it from being forged, altered or falsified(article 6), as well as the 'Terms & Conditions for Corporate Electronic Financial Service' and the 'Agreement for the Use of Corporate Banking Service for Affiliate.'

I hereby apply for the service as described above.

MM DD YYYY

Applicant (Registered corporate seal)

■ Power of Attorney

I, the Principal, hereby authorize the proxy below to conduct acts related to the corporate banking service for affiliate described in this application including, but not limited to, the new/change/termination of the service, withdrawal of OTP issuance fee, etc.				
Proxy	Name		Date of Birth	
	Address			
	Relationship		Delegator	
Principal	Company Name		Representative	(Registered corporated seal)

