

Receivables Management Application Form

بنك دبي التجاري
Commercial Bank of Dubai



Company (the "Client") Information

Company Name			
Address			
P.O. Box		Emirate	
Authorised Contact Person			
Telephone		Mobile	
E-Mail			

Client Account Information

Account Name	Account Number

iBusiness Linking

iBusiness Main Account Number	
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Services Configuration

<input type="checkbox"/> Reconciliation	<input type="checkbox"/> Virtual Accounts	<input type="checkbox"/> Account Pooling
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Reconciliation

Invoice Search Pattern		No. of Characters	
Search Pattern Inclusive?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Sample	
Invoice Reconciliation Tolerance	Slab	Shortage Tolerance Amount	Excess Tolerance Amount
Exact Reconciliation	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, Exact Reconciliation Rule to be setup during implementation.)		

Generic Reconciliation *(Applies when payer is matched but invoice not matched)*

Overdue Invoices	Rule	<input type="checkbox"/> FIFO	<input type="checkbox"/> Higher Invoice Amount
		<input type="checkbox"/> LIFO	<input type="checkbox"/> Lower Invoice Amount
	Recon Basis	<input type="checkbox"/> Invoice Date	<input type="checkbox"/> Invoice Due Date
Non-Overdue Invoices	Rule	<input type="checkbox"/> FIFO	<input type="checkbox"/> Higher Invoice Amount
		<input type="checkbox"/> LIFO	<input type="checkbox"/> Lower Invoice Amount
	Recon Basis	<input type="checkbox"/> Invoice Date	<input type="checkbox"/> Invoice Due Date

Virtual Accounts

Number of Financial Divisions Required	
Number of Virtual Accounts Required	
<i>Further Virtual Account configuration requirements to be setup during implementation.</i>	

Cheques *(Optional. Mandatory in case of Virtual Account transactions.)*

Apply Account Pooling	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Account Pooling Type	<input type="checkbox"/> Direct	<input type="checkbox"/> Slab	<input type="checkbox"/> Percentage
Account Pooling Configuration:	Direct Pooling Account: _____ <i>(Only in case of Direct Pooling)</i>		
	Slab / Percentage	Account	
<i>(Only in case of Slab or Percentage Account Pooling. Please indicate the slabs or percentage distribution and the respective credit account. Percentage pooling must total 100%)</i>			
Consolidation Level <i>(Optional)</i>	<input type="checkbox"/> Instrument – Individual Credits	<input type="checkbox"/> Product – Bulk Credit	

Cash *(Applicable to iCash Only)*

Apply Account Pooling	<input type="checkbox"/> Yes	<input type="checkbox"/> No <i>(If No, Division pooling type will be used)</i>		
Account Pooling Type	<input type="checkbox"/> Direct	<input type="checkbox"/> Slab	<input type="checkbox"/> Percentage	<input type="checkbox"/> Division / Account
Account Pooling Configuration:	Direct Pooling Account: _____ <i>(Only in case of Direct Pooling)</i>			
	Slab / Percentage	Account		
<i>(Only in case of Slab or Percentage Account Pooling. Please indicate the slabs or percentage distribution and the respective credit account. Percentage pooling must total 100%)</i>				
Consolidation Level <i>(Optional)</i>	<input type="checkbox"/> Location – Bulk Credits	<input type="checkbox"/> Division / Account – Individual Credits	<input type="checkbox"/> Pick-Up Point – Bulk Credits	

Account Transfers and Remittances *(Applicable to Virtual Account transactions only)*Apply Account Pooling Yes No

Direct Pooling Account

Consolidation Level *(Optional)* Instrument – Individual Credits Product – Bulk Credit**Charge Account Details**

Account Name

Account Number

Authorization

The Client acknowledges that iBusiness is required to access Receivables Management and agrees for the selected Services for the listed Accounts to be enabled in its iBusiness.

The Client authorizes CBD to provide corporate administration access for Receivables Management for the listed iBusiness Corporate Administrator.

The Client understands and agrees to the Bank's terms and conditions of the Agreement for the provision of Receivables Management Solutions which is available at the CBD website <https://www.cbd.ae>.

The Client represents and warrants that the signatory/ies below is/are duly authorized to enter into this Agreement on behalf of the Client.

For and on behalf of the Client

For and on behalf of the Client

Authorized Signature and Company Stamp_____
Authorized Signature and Company Stamp**FOR BANK USE ONLY**

Client RIM

Received by

Approved by

Enrolled by

Signature / Date

Signature / Date