

CAPITAL ONE BANK
Change in Authorized Signers for Commercial Accounts
 DATE: _____

ACCOUNT NUMBER: _____	FULL LEGAL BUSINESS NAME: _____
PRODUCT: _____	ADDRESS: _____
COST CENTER: _____	INDIVIDUAL AUTHORIZING CHANGE: _____
ACCEPTED BY: _____	(verified to Depository Resolution)
USER ID: <u>Attend</u>	PHONE NO: _____

SIGNATURES TO ADD:

NAME	TITLE	SIGNATURE

SIGNER'S NAME: _____	SIGNER'S NAME: _____
ADDRESS: _____	ADDRESS: _____
COUNTRY: _____ DOB: _____ SSN: _____	COUNTRY: _____ DOB: _____ SSN: _____

SIGNER'S NAME: _____
 ADDRESS: _____

 COUNTRY: _____ DOB: _____ SSN: _____

No. of Signatures Required: _____

SIGNERS TO DELETE:

NAME	TITLE

By the Account Holder's authorized signature below, the Account Holder is requesting changes to the signing authority on the above referenced account and acknowledges and agrees to the following:

To secure payment of any monies that you may owe us for any reason, you grant us a continuing security interest in all funds that you may now or in the future maintain on deposit with us, with the exception of funds held in a trust or fiduciary account, or in an Individual Retirement Account, or in other qualified tax deferred accounts. You agree that we may apply (set-off) funds that you maintain on deposit with us against any amount that you may then owe us under a loan, or overdraft, or guaranty, or for any other reason. We may set-off your account at any time whether or not you are then in default in making payments to us, and we may exercise our right of set-off even if it results in an interest penalty or dishonor of subsequent checks and other items with respect to your account. Our right to set-off your account is in addition to any other rights and remedies that we may have under law or under any other contractual agreement.

With the exception of amendments/revisions as stated above, all previously made designation of authorized signers on the above referenced account shall remain in full force and effect.

By signing below, I hereby represent and attest that I have the appropriate authorization on behalf of the Company to request these changes, and that these changes are duly authorized by the Company. It is also understood that the Bank must have sufficient time to communicate this change/these changes to its division, departments and branches.

By: _____ Title _____