

# National Bank Of Anguilla Ltd.

## Addendum to Online Banking Agreement

What username would you like to use for signing on to your online banking?

**Preferred username** \_\_\_\_\_

For your security we would never reset your password over the phone, unless we can confirm your identity. Please select **ONE** of the questions listed below and provide us with the response. This will be used to verify your identity when you call on the phone to reset your password or enable your account, should you become disabled.

1. What is your favourite movie? \_\_\_\_\_
2. What was the make of your first car? \_\_\_\_\_
3. When is your anniversary? \_\_\_\_\_
4. What is your favourite colour? \_\_\_\_\_
5. What is your favourite fictional character? \_\_\_\_\_
6. What is your favourite person from history? \_\_\_\_\_
7. What is your favourite book/story from childhood? \_\_\_\_\_
8. What is your favourite movie from childhood? \_\_\_\_\_
9. Who were your 2 best friends from childhood? \_\_\_\_\_
10. What is your favourite TV show that isn't on anymore? \_\_\_\_\_
11. Who is your favourite actor? \_\_\_\_\_
12. Who is your favourite musician? \_\_\_\_\_
13. What was your favourite place to visit as a child? \_\_\_\_\_
14. Which phone number do you remember most from childhood? \_\_\_\_\_
15. What is the name of your first boyfriend/girlfriend? \_\_\_\_\_

If you wish to have restrictions with regards to what can be done with any of the accounts you have authorized for use on Online Banking, please fill in below:

Account Number	List	Credit	Debit	Inquire	Full Access

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Co-Applicant Signature**

\_\_\_\_\_  
**Date**