

School-AIBMS Requirements

Date: _____

Organisation Name: _____

Use this checklist to help you verify that all required documentation is included. Please ensure the documentation is legible and in date. Please do not post this documentation. We will arrange for a representative to collect it.

| Requirement | | Enter Date where required |
|--|--------------------------|--|
| Proof of banking: Bank statement within 6 months or copy of an unused cheque from cheque book. (Proof of banking must clearly show the Bank Account Name, Number and Sort Code) | <input type="checkbox"/> | Statement date <div style="border: 1px solid black; width: 100%; height: 20px; margin: 0 auto;"></div> |
| Proof of bank signatories: Letter from bank stating names of ALL signing authorities on bank headed paper Or A letter on school headed paper (signed by the principal) stating the names and roles of all people with signing authority on the bank account. | <input type="checkbox"/> | Please ensure the person who signs the application form is on the letter from the bank (or school) and has provided their documentation as outlined below (Proof of ID and Proof of residential address) |
| Board of Management: List of all members of the board of management on the schools headed paper. This should include roles and residential address. | <input type="checkbox"/> | |
| 1st Signatory Name (note: at least one signatory must be a member of the board of management) | | |
| Proof of ID Driving Licence or Passport (must be current and in date) | <input type="checkbox"/> | Expiry Date <div style="border: 1px solid black; width: 100%; height: 20px; margin: 0 auto;"></div> |
| Proof of residential address One of the following date within 6 months ... <ul style="list-style-type: none"> Home utility bill/personal bank Statement/personal credit card Statement/Personal Revenue Social Welfare letter | <input type="checkbox"/> | Bill Date <div style="border: 1px solid black; width: 100%; height: 20px; margin: 0 auto;"></div> |
| 2nd Signatory Name | | |
| Proof of ID Driving Licence or Passport (must be current and in date) | <input type="checkbox"/> | Expiry Date <div style="border: 1px solid black; width: 100%; height: 20px; margin: 0 auto;"></div> |
| Proof of residential address One of the following date within 6 months ... <ul style="list-style-type: none"> Home utility bill/personal bank Statement/personal credit card Statement/Personal Revenue Social Welfare letter | <input type="checkbox"/> | Bill Date <div style="border: 1px solid black; width: 100%; height: 20px; margin: 0 auto;"></div> |
| Bank Statement _(Private School Only) Last 3 MONTHS – long statement | <input type="checkbox"/> | |
| Accounts _(Private School Only) Full accounts for the latest financial year (profit * loss, balance sheet and accounting notes) | <input type="checkbox"/> | Year |

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|---|--|
| CARD TURNOVER (an estimate of how much you think you will take in by card per year) | |
| AVERAGE TRANSACTION VALUE | |
| NUMBER OF PUPILS | |

Please note:

1. If any members on the Board of Management list that you provide have a political role (such as a local Councillor for example) AIB merchant services will request proof of identity and proof of address documents for these members. This would be a requirement for compliance with anti-money-laundering regulations relating to setting up a merchant account and may be requested even if the member is not an authorised signatory on the application.
2. All documentation provided in respect of the application for a merchant account is subject to checking and risk assessment by AIB and they may request additional information from time to time.

| WHAT ARE PAYMENTS FOR? | TURNOVER ESTIMATE | Approx. number of days after payment does activity start or is item received |
|---|---------------------------|--|
| TRIPS | | |
| BEFORE/AFTER SCHOOL ACTIVITIES | | |
| SCHOOL EQUIPMENT (journals etc.) | | |
| EXAM FEES | | |
| ADMIN FEES | | |
| VOLUNTARY CONTRIBUTIONS | | |
| | | |
| Fees Due Date (Private schools) | No. of Instalments | % by instalment |
| | | |

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|------------------------------------|-------------|--|
| Internal Use Only | | |
| | | |
| Signed by | Date | |
| Payzone Representative: | | |
| Sales Admin Representative: | | |