J Trust Royal Bank

Corporate Connect Solution Authorization Matrix Form

REGISTRATION PROCESS

Step 1	Step 2	Step 3
Complete Corporate Connect Solution Authorization Matrix Form	Submit the completed form with Agreement for JTRB Swift Messaging Services to your JTRB Representatives.	You will work with JTRB Representatives for scoping, connectivity & configuration, and Testing Approach

CHANNEL OPTION

☑ **Swift FileAct** ☐ New ☐ Maintenance ☐ Terminate

Company Details*

Group name of company

Registered Company Name*

Country of incorporation*

Business Contact Person(s)* This person is authorized to receive communication and to communicate your company's information to us.

First Name:		Last Name:		Phone Number:		
Email:				Mobile Number:		
First Name:		Last Name:		Phone Number:		
Email:				Mobile Number:		

Technical Contact Person(s)* This person is authorized to communicate and to work end-to-end connectivity, configuration, and testing with Bank.

First Name:		Last Name:		Phone Number:		
Email:				Mobile Number:		
First Name:		Last Name:		Phone Number:		
Email:				Mobile Number:		

SWIFTNET FILEACT PARAMETERS:

This section is applicable for Swift FileAct only and please read below:

1. Complete this form to capture Header Parameters if you want to use SWIFT FileAct for transferring Bulk Payment files. You will need a SWIFT SCORE for your company and configure your payment files with JTR Bank parameters (SWIFT BIC: tcabkkhpp) to connect to the Corporate FileAct Service.
2. Customers must complete the following FileAct details for both Test (User Acceptance Testing) and Live (Production) environments to enable the service. Note: Initially only
3. Customers may need to re-sign the Agreement for SWIFT Messaging Services for any amendments of service. For more information, please refer to your JTR Relationship Manager

SWIFTNET FILEACT PARAMETERS:

File Name	Production	Test Environment (UAT)
Requestor DN*		
Responder DN	o=tcabkhpp,o=swift	o=tcapkhpp,o=swift
Service Name	swift.corp.fa(Real-Time-Modes)	swift.corp.fa!p(Real-Time-Modes)
Requestor Type*	pain.001.001.03*	pain.001.001.03*
File Name	<Customer ID>_<Unique Number>_<Timestamp>.XMLCustomer ID: 3 or 4 alphas Unique Number: 6 alphanumeric (generated by system)Timestamp:YYYYMMDDHHMMSS	<Customer ID>_<Unique Number>_<Timestamp>.XMLCustomer ID: 3 or 4 alphas Unique Number: 6 alphanumeric (generated by system)Timestamp:YYYYMMDDHHMMSS
File Info	SwCompression=None	SwCompression=None
Non-repudiation	TRUE	TRUE
Delivery Notification	TRUE	TRUE

PAYMENT INSTRUCTION ACKNOWLEDGEMENT(E-MAIL):

Request Type	Name of receipient	E-mail address

PAYMENT ADVICE NOTIFICATION (E-MAIL):

Debit Advice: JTRB's sender account will receive this advice after fund is debited from their account.

Credit Advice: This advice is applicable for incoming payments and for *Single Transaction only.

Assigned email will receive debit or credit advice on any payments under all accounts after fund is debited and credited.

Request Type	E-mail address	Name of receipient	*Single Transaction	Bulk Upload	Salary Upload
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐

☐ Terminate payment advice (to remove all existing receipients).

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PRODUCT AND PAYMENT

☐ **Payments and Salary**

- Account to Account (A2A)
- Domestic Fund Transfer (DFT)
- International Fund Transfer (IFT)

☐ **Statement Reporting (MT940)**

Designated account for Channel(s) setup, monthly and services fees (not transaction charges)

Account Number* | CCY

Remove user access

	Existing JTRB User ID*	First Name*	Last Name*
1			
2			
3			
4			

User Details

User 1

Request Type*: | Existing User ID:

First Name* | Last Name*

Email*

Phone Number* (Country Code)

NID/Passport No.* | Date of Birth*

Address*:

Product Access	Reporting	Authorizer	Group Panel	Checker
Payments+Salary	☐	☐	☐	☐
Account Access:				
Note:				

User 2

Request Type*: | Existing User ID:

First Name* | Last Name*

Email*

Phone Number* (Country Code)

NID/Passport No.* | Date of Birth*

Address*:

Product Access	Reporting	Authorizer	Group Panel	Checker
Payments+Salary	☐	☐	☐	☐
Account Access:				
Note:				

User 3

Request Type*: | Existing User ID:

First Name* | Last Name*

Email*

Phone Number* (Country Code)

NID/Passport No.* | Date of Birth*

Address*:

Product Access	Reporting	Authorizer	Group Panel	Checker
Payments+Salary	☐	☐	☐	☐
Account Access:				
Note:				

User 4

Request Type*: | Existing User ID:

First Name* | Last Name*

Email*

Phone Number* (Country Code)

NID/Passport No.* | Date of Birth*

Address*:

Product Access	Reporting	Authorizer	Group Panel	Checker
Payments+Salary	☐	☐	☐	☐
Account Access:				
Note:				

User 5

Request Type*: | Existing User ID:

First Name* | Last Name*

Email*

Phone Number* (Country Code)

NID/Passport No.* | Date of Birth*

Address*:

Product Access	Reporting	Authorizer	Group Panel	Checker
Payments	☐	☐	☐	☐
Account Access:				
Note:				

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Request Type*: Existing User ID:

User 6 First Name* Last Name* Payments+Salary

Email* Account Access:

Phone Number* (Country Code)

NID/Passport No.* Date of Birth*

Address*: Note:

Request Type*: Existing User ID:

User 7 First Name* Last Name* Payments+Salary

Email* Account Access:

Phone Number* (Country Code)

NID/Passport No.* Date of Birth*

Address*: Note:

Request Type*: Existing User ID:

User 8 First Name* Last Name* Payments+Salary

Email* Account Access:

Phone Number* (Country Code)

NID/Passport No.* Date of Birth*

Address*: Note:

AUTHORISATION MODEL-PAYMENTS

Panel 1

Account Number*: Authorise in Sequence

Product*: Payments and Salary

Amount Range	Currency	Authorisation Role	Signing matrix* (If Panel is selected, you must fill in here)

Panel 2

Account Number*: Authorise in Sequence

Product*: Payments and Salary

Amount Range	Currency	Authorisation Role	Signing matrix* (If Panel is selected, you must fill in here)

Panel 3

Account Number*: Authorise in Sequence

Product*: Payments and Salary

Amount Range	Currency	Authorisation Role	Signing matrix* (If Panel is selected, you must fill in here)

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DOCUMENTS AND YOUR AGREEMENT

We acknowledge and agree that our request is subject to JTRB General Banking Conditions and any other applicable Agreement as defined in the JTR Connect Terms and Conditions. JTR Connect constitutes an "Electronic Banking Channel" and each person specified in User's Information section of this Application Form shall constitute a "User" as referred to in JTRB General Banking Condition.

Signature*	Signature*	Company Stamp
Name*	Name*	
Position	Position	
Date*	Date*	

BANK USE ONLY

We hereby confirm that the client has correctly executed this form and his/her identity has been verified as per Identification requirements or the Company Board Resolution details supplied in support of this documentation.

Signature	Signature	Signature Verified
Name*	Name*	
Position	Position	
Date*	Date*	

CUSTOMER AGREEMENT DOCUMENTS

When you sign this application, as you access payment products and services using JTR Connect you are bound by the JTRB General Banking Conditions and any supplemental terms applicable in your jurisdiction.

When you request for any product or services referred to in this application, you agree that your request is subject to JTRB General Banking Conditions and any other applicable agreements as defined in the JTR Connect Terms and Conditions.

ADDITIONAL TERM

1. In this application: Customer Agreement means the terms in this application and any agreement referred to in the Customer Agreement section of this application.
2. In case of termination of JTR-Connect, it will be subject to 30 days advanced notice. All fee applicable within the 30 days shall be charged and non-refundable.
3. Document Imaging
   a. JTRB will make available to the customer a service via JTR Connect which will allow customers to view and print certain documents as determined by JTRB (Documents) from time to time (Service).
   b. JTRB will endeavor to make images of Documents accessed using the Service available for viewing and printing within 7 days of the original documents being provided by any third party to JTRB.
   c. JTRB is not responsible for the information contained in or the accuracy of the images of the Documents nor liable for any delays in any Document being available for viewing and/or printing.
   d. The customer agrees to pay JTRB all fees, government charges (including, without limitation, goods and services tax (if applicable)) and other charges applicable to use of the Service. The customer authorises JTRB to debit such fees and charges to its account(s) nominated in this application.
4. Inconsistency If there is inconsistency between this English version of the application and the Customer Agreement and any translation, the English version prevails.
5. Business Support Service is available from 8am - 5pm during business day (Monday-Friday), more information (+855)23 999 255, BusinessService@jtrustroyal.com.
6. Any issues caused after business support hour (after 5pm) will be resolved the next business day.

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Appendix sFTP Configuration Details

JTRB End	Test/UAT	Production	Notes
sFTP Hostname	ccs-transfer.uat.jtrcloud.com	ccs-transfer.jtrustroyal.com	Always use the hostname to connect.
IP Addresses	122.248.253.234, 54.179.217.228	54.251.118.9, 52.74.124.102	Used for optional whitelisting only.
Port	22	22	
Directory for Inbound files (to the bank)	/incoming	/incoming	Customer may write to this directory only.
Directory for Outbound files (from the bank)	/outgoing	/outgoing	Customer may read and delete files in this directory.
PGP Public Key Fingerprint (if required)	01E6C2A22DFD744F11F8059FF8BE 7593264A09D3	39CFF8E34A463C280F379F 029B2594673776F9A6	Bank public PGP key to encryption file (if required) and the key will be sent separately.
Customer End	**Test/UAT**	**Production**	**Notes**
IP Addresses	<<Required>>	<<Required>>	Only the listed addresses will be allowed to connect.
Account Number	<<Required>>	<<Required>>	Required (can support one/more account number) when customer need MT940 statement, otherwise is optional.
SSH Key Fingerprint	<<Required>>	<<Required>>	The fingerprint/digest of your SSH public Key. Key will be requested separately.
PGP Encryption (if required)	**Test/UAT**	**Production**	**Notes**
Public Key Fingerprint	<<Required>>	<<Required>>	The fingerprint/digest of your PGP public Key. Key will be requested separately.
Sending Files to the Bank			
Filename Pattern	Format	Encrypted/Signed	
Example: YYYYMMDDHHMM_UID.xml	<pain.001.001.03, iDoc, JTRB Delimited>	Yes/No	File name must include a date/timestamp and a Unique Identifier.
Receiving Files from the Bank			
Filename Pattern	Format	Encrypted/Signed	
YYYYMMDD-AccountNumber.txt	MT940	Yes/No	
Incoming File Name Notes			
File extension must match the file type:			
pain.001.001.03	.xml		
SAP iDoc	.idoc		
PGP Encrypted	.gpg or .pg		