

## Mobile Banking Application/ Amendment Form.

Request type (Tick)	New Amend Close PIN Reset
NOTE: PRINT IN BLOC	CK LETTERS and complete all sections.
Section A: Customer I	Details.
Dr Mr M	Mrs Ms
First Name:	Surname:
D Type:	ID No: Cell +265
SACCO Number/Employ	ment: Email:
PostalAddress:	
address.	
Section B: Linked Mo	<b>bile Phone.</b> Please Add/Remove the following mobile phone numbers accordingly.
Add	SMS Notification Remove
Cell	Yes/No
Cell	
	Yes / No
Section C: Services app	
	following features/ services (please tick preferred service below)
Balance enquiry all saving	
Balance enquiry other pro	
Summary of terms of use for 1. Funds can be trans	or service sferred from demand deposits only
	has the following charges: (a) Balance enquiry: MWK100.00 per session, (b) Mini Statement: ession, (c) Funds Transfer: MWK200.00 per transaction.
3. The Institution will i	not be held liable for transfer to wrong accounts not be held liable for un authorised access to your account out of your negligence
7. The mondation will be	
ction E: Declaration.	
	hat I have read and understood the above terms of use for the product and by executing
ŕ	express my consent and willingness to abide by those conditions.
Signature	Date
Office Use Only.	
Office Ose Offiy.	
Member/customer num	nber/Employment number
Received by	Date
Approved by	
Processed by	