



UKRISTO NA UFANISI DT SACCO LTD

P.O BOX 872-00605, NAIROBI

TEL:0720339673 / 0207650581

EMAIL:info@ukristonaufanisicoop.com

MOBILE BANKING APPLICATION FORM

(NB: ATTACH COPY O	F ID)															
Branch:								Date:								
APPLICANT'S DETAIL	LS. (M	UST	BE F	ILLE	ED IN	BLO	CK L	<u>ETTE</u>	<u>(RS)</u>							
NAME:																
ID NUMBER:																
EMAIL ADDRESS:																
ACCOUNT NUMBER:	1	0	7	-												
MOBILE NUMBER:	+	2	5	4												
MOBILE BANKING AF	PPLIC	CATI	ON (7	<u> FICK</u>	APP	ROP	RIAT	ELY)								
NEW REGISTRATION	P	IN RI	ESET		PIN I	UNBL	OCK		СНА	NGE	OF M	IOBII	LE N	UMB1	ER _	
DISABLE HANI	OSET	СНА	NGE													
CHANGE OF MOBILE	<u>NUM</u>	<u>BER</u>														
OLD MOBILE NUMBER	l :		+	2	5	4										
NEW MOBILE NUMBER	₹:		_	2	_	1]

DISCLAIMER AND DECLARATION:

Date Sign

Terms and Conditions of Our Mobile Banking Convenience Services are as follows:

- 1. By filling this form, you affirm that you are the legal owner of the Sacco account number provided and that any information filled here is accurate, true and correct.
- 2. You agree that you'll take full responsibility to ensure that safety, security and integrity of your account and transactions when using this convenience service.
- 3. You agree that you will not provide your username, password or other access information to any unauthorized person.
- 4. The member shall accept full responsibility for any transactions effected as a result of using this convenience service.
- 5. The Sacco, at its own discretion, will not undertake any given instructions given to it through this service if it believes that the instructions are not from the member.
- **6.** You agree that the Sacco shall not be liable for any loss or damages incurred by the member as a result of non-commitment to instructions given for any reason whatsoever.
- 7. The Sacco shall at any time be entitled to amend, supplement or vary any of these terms and conditions and fees applicable at its sole discretion with or without notice to the member and such amendment, supplement or variation shall be binding on the member.

I declare that I have read and understood the Terms & Conditions governing Ukristo na Ufanisi Sacco LTD Mobile convenience services.

MEMBER'S SIGNATUE	RE: DATE:	
FOR OFFICIAL USE O	<u>NLY</u>	
Branch Officer Verificati	ion:	
	KYC details verified by:	_
Name		
Date		
Sign		
Supervisor\Manager Ver	Authorized by:	
Name	•	
Date		
Sign		
ICT Department Approv	<u>val:</u>	
	Verified by:	
Name		