

FBC BANK LIMITED
REGISTERED COMMERCIAL BANK

To: THE MANAGER ----- BRANCH DATE -----

Application for SMS / Telephone Banking

Surname: ----- First Name(s):-----Mr/Mrs/Miss/Ms/Dr. etc

Identification Number:-----

Card No.(i) -----

Account No. (i)----- Account No. (ii) -----

Account No. (ii)----- Account No. (iv)-----

Mobile No(s) :-----

Home Tel: -----

Business Tel:----- Email address -----

FOR BILL PAYMENT APPLICATION (OPTIONAL)

Beneficiary Institution	Account Number	Additional Information E.g Phone number
1. Zesa	-----	-----
2. Econet	-----	-----
3. Truworths / Topics	-----	-----
4. Firstel	-----	-----
5. TelOne	-----	-----
6. NetOne	-----	-----

Address:-----

Customer Signature:----- Date:-----

BANK USE ONLY

Customer Details Verified By: -----

Authorizing Manager:----- **Date:**-----

Manager Convenience Banking:----- **Date:**-----