

AGENT APPLICATION FORM

Individual **Sole Proprietor** **Business**
Business Name:

PERSONAL INFORMATION (Individual)

Last Name: _____ Other names: _____
Gender: Male Female Date of Birth (DD/MM/YY): _____
Residential Address: _____
Email: _____
Telephone Number: _____
Next of Kin (Name): _____
Next of Address: _____
Next of Kin Telephone: _____

User's Information (If this form is filled by the sub-user, approval from the main user will be needed)

Sub- user: yes No

Main user's approval:

Name: _____

Phone number: _____

Signature: _____

Bank Information (if you wish to receive commissions by bank deposit)

Name of Bank: _____

Account Number: _____

IDENTIFICATION DOCUMENTATION

National Id

Passport

Identification Number: _____

AGENT CATEGORY

Full Agent

Mini Agent

TIN (full Agent only): _____

DEVICE INFORMATION

MobiCash Supplied:

Smart Phone

Alcatel Tablet

Finger Print Reader

None

IME: _____

Agent Supplied:

Smart Phone

Tablet

Manufacturer: _____

Computer

Manufacturer: _____

IP: _____

IME: _____

How would you like to receive MobiCash information?

SMS

E-mail

DECLARATION

I declare that:

The information provided on this form is correct to the best of my knowledge and without misrepresentation deliberate or otherwise. I agree to update the information provided herein when it is no longer accurate. Any legal consequences arising from what I have stated here is my responsibility. By signing this form, I acknowledge that I have read and agree to the terms and conditions of the attached Agent's Agreement.

Agent's Name: _____

Agent's Signature: _____

Date of Enrollment: _____

MobiCash Sales officer's Name: _____

Sales officer Signature: _____