



## E-Cheque Authorised Signatory Registration Request Form

Request Date										
1. Customer Detai	ls:									
Type of request	Crea	te		Modify		Delete	е			
Customer Name										
Customer Number										
ID Type	CR	Sm	art Card	GCC	: ID	Unit (	Code		Other	
ID Number										
2. Authorised Sign	atories Deta	ils:								
Signatory Name										
ID Type	Sma	rt Card		Passport		GCC ID		Other		
ID Number	Date of Birth									
Mobile Number										
Email Address										
Address										
3. For Enterprises/	SMEs Only:									
Approve Writers			Yes	No						
Approve Cheque Boo	k Requests		Yes	No						
Customer declarati	<u>on</u>									
I/We confirm that the in all respects.	information p	rovided	in this E-	Cheque Auth	norised S	Signatory	Registra	ation Re	equest For	m is correct
I/We also confirm an apply when the above	d acknowledg e named Autl	ge that a norised S	ny paymo Signatorio	ent limits he es issue an E	ld in the E-Chequ	bank's re e.	cords fo	or phys	sical chequ	ues will also
Customer Signature(	s)									
For Bank Use Only	1									
Date/Time received	l:									
Received and chec	ked by:									
Signature verified										