

E-Banking Application/Update Form Business/Company

Branch		Date						
I/we request to apply for (please √where applicable)								
1. Tell us about yourself								
Company Name		Applicant Nan	ne					
ID/Passport No. Passport Expiry Date // // // // // Passport Expiry Date								
Office Telephone No.		Mobile No.						
E-Mail Address								
Existing Online User ID (if any) Date of Birth								
Current contact informatio	n on record with the bank							
Mobile Phone No								
E-Mail Address								
If different from the above below:	, this is to authorize you to cha	nge my/our contact	details to the nev	contact info	ormation as			
Mobile Phone No								
E-Mail Address								
NB: Strictly one number to be assigned for your accounts								
Official Use Only								
	evant due dilligence has been co		contact informat					
Signature verified by:	Approved by Branch Mana	Approved by Branch Manager: Inputter: Authorizer:						
2. Accounts you want to	register and services you	want						
			Preferred Short Name	Notife of	illeines ankines			
Account Name	Account Number	Branch	(Max 10 characters including spaces) * Mandatory	40 yr	Sanki Estate			
a.			Plandatory					
b.								
C.								
d.								
e.								
3. Choose your Mobile Banking options We shall set you up on the new number above provided it is a Kenyan mobile number								
Account Number Unlimited Transaction Alerts*			Period	Periodic Balance Alerts				
(As per section 2)	(Flat Fee)			Weekly	Monthly			
a.								
b.								
C.								
d.								
Notify me only of trans	All							
*Credits, fixed deposit maturity & loa * Debit alerts are free	n installment due							



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4. Choose your eSta		l set you up on the new e-mail address you have d overleaf							
Account Number eStatement frequency									
(As per section 2)	Daily	Week	dy	Monthly					
a.									
b.									
C.									
d.									
5. Online Banking - Additional information for company bank accounts									
Company Name		on to company can							
Office Telephone No.		Mobile No	D						
Website		E-Mail							
6. Confirmation by authorized signatory									
indicated above an	we acknowledge that the information that the information e endorse the instruction.	on provided herein is	correct and true t	of the account(s) to the best of my/our					
				MM/YYYY					
Authorised Sign	atory Name	Signature		Date					
			DD/	MM/YYYY					
Authorised Signa	atory Name	Signature		Date					
7. Board Resolution									
We wish to inform		Kenya Limited that a he 'Company') held o	•	e board of directors of					
It was resolved that Diamond Trust Bank Kenya Limited be and is hereby authorised to honour the application for the service(s) solely executed by the said applicant. We accept to be bound by the terms and conditions as provided on www.dtbafrica.com and the instruction/transaction(s) carried out by the Applicant whilst using the services as if such application									
and instruction/tra	nsaction(s) were made	de by the company.							
			DD/[MM/YYYY					
Director Name		Signature		Date					
			DD/	MM/YYYY					
Director Name Signature Date									
FOR BANK USE ONLY									
Created by:	Name :	Date:	Time:	Signature :					
Authorised by:	Name:	Date:	Time:	Signature :					