

## M-PESA BUSINESS ADMINISTRATOR FORM

## CATEGORY 1: BUSINESS ADMINISTRATOR REQUEST: NEW ACCESS REQUEST OR UPDATING DETAILS OF EXISTING ADMINISTRATOR

NEW ADMINISTRATOR ON ☐ M-PESA G2 ☐ MBP-B2B PORTALUPDATING ADMIN DETAILS ON ☐ M-PESA G2 ☐ MBP-B2B PORTAL

## NOTE:

PORTAL NOTE: MBP - (M-PESA BUSINESS PORTAL) - <https://pay.m-pesaforbusiness.co.ke/>M-PESA G2 - <https://org.ke.m-pesa.com/orglogin.action>

## SELECT/INDICATE THE BUSINESS CATEGORY

- ☒ Sole Proprietor ☐ Partnership ☐ Limited Liability Company ☐ NGO - Non-Governmental Organization
- ☐ Other Business Category.....

## REQUIRED DOCUMENTS FOR NEW BUSINESS ADMINISTRATOR REQUEST

REFER TO PAGE 2 ACCORDING TO YOUR BUSINESS CATEGORY

NOTE: Signatories must be the main shareholders or senior authorized signatories under the organization as per valid registration document e.g., CR12

M-PESA Short Code {(Paybill No./Bulk Payment(B2C) No./Buy goods-HO/Store Number)}	
M-PESA Business Portal Entity Code (Leave blank if done during initial sign up)	
Business/Organization Name	BIN MAN KENYA
Preferred administrator username as per user Identification Document	ANTONY
First Name	ANTONY
Middle Name (Not Mandatory)	MUHIA
Last Name	WANGUI
Nationality	KENYAN
Identification Document Type (e.g., National ID, Passport, Alien ID, Military ID etc.)	NATIONAL ID
Identification Document Number	32452550
Date of Birth	23 / 06 / 1995
Personal email address (credentials will be sent to this email address)	antony@siki-ke.co.ke
Proposed/Nominated Administrator's Safaricom Mobile number	0722 230603

## CATEGORY 2: PASSWORD RESET AND ACCOUNT CLOSURE FOR EXISTING BUSINESS ADMINISTRATOR ONLY

- ☐ PASSWORD RESET ☐ CLOSING OF EXISTING ADMINISTRATOR ACCOUNT

## M-PESA SYSTEM OR PORTAL BEING ACCESSED

- ☐ M-PESA Organization Portal (M-PESA G2) ☐ M-PESA BUSINESS PORTAL (MBP)

M-PESA Short Code {(Paybill No./Bulk Payment(B2C) No./Buy goods-HO/Store Number)} OR	
M-PESA BUSINESS PORTAL - BUSINESS ENTITY CODE	
Organization Name	
Existing Administrators Username	
Identification Document Number	

## Authorized Signatory 1

Name ..... Anthony Muhia Wangui

Date ..... 12<sup>th</sup> May 2025

Sign ..... *Anthony* for Anthony

## Authorized Signatory 2

Name .....

Date .....

Sign .....

## M-PESA ACCOUNT OPENING AUTHORIZATION FORM

This is to certify that a meeting of the (Board of Directors / Executive Committee) of the Corporation / Organization (indicate name).....

whose registered office is at.....  
held on ..... day of ..... it was resolved:

1. That M-PESA Business Account be opened with Safaricom Limited for the following service:

- |   |   |
|---|---|
| <input type="checkbox"/> Paybill and Bulk Payment (B2C) | <input type="checkbox"/> M-PESA Business Till (Transactional Buy goods Till to receive and make payments) |
| <input type="checkbox"/> Buy Goods                      | <input type="checkbox"/> Bulk Payment (B2C)   |
| <input checked="" type="checkbox"/> Paybill             | <input type="checkbox"/> Sure Pay   |

2. The following..... (name, surname) is / are authorized on behalf of the company to execute, sign and deliver to Safaricom on behalf of the company any forms, mandates, agreements and any account opening documentation and do all acts, things and matters whatsoever necessary for the opening, maintenance and operation of the account.

3. We hereby certify the above to be a true copy of the Minutes and that this resolution has entered in the Minute Book of the Company in accordance with the Company's Articles of Association and the applicable laws and regulations.

4. The purpose of the account is for.....

5. The bank account details to be used for this purpose are as follows:

Bank Name..... Bank Branch.....  
Account Name..... Account Number.....

6. Nominated Safaricom mobile number authorized to Perform Business Payments.....

\*Kindly note the provided Mobile number can Pay businesses, Pay other mobile numbers and initiate withdrawals to Bank/M-PESA from the till

7. Attached is the M-PESA application form, signed terms and conditions and all other KYC documentations for the company as defined on requirements checklist.

Authorised Signatory

Authorised Signatory

Name.....	Name.....
Date.....	Date.....
Sign.....	Sign.....

Company seal / stamp.....

\*This is applicable to all Corporations and registered organizations except individuals and sole proprietors\*



## PAYBILL STANDARD TARIFF

- Mgao Tariff – split charges between customer and business
- Business Bouquet Tariff - No charges to the business; customer bears all charges.
- Customer Bouquet Tariff - No charges to the customers; business bears all charges.

Min	Max	Mgao Tariff			Business Bouquet Tariff			Customer Bouquet Tariff		
		Customer	Business	Total	Customer	Business	Total	Customer	Business	Total
1	49	0	0	0	0	0	0	0	0	0
50	100	0	0	0	0	0	0	0	0	0
101	500	5	0	5	5	0	5	0	5	5
501	1,000	10	0	10	10	0	10	0	10	10
1,001	1,500	10	5	15	15	0	15	0	15	15
1,501	2,500	13	7	20	20	0	20	0	20	20
2,501	3,500	16	9	25	25	0	25	0	25	25
3,501	5,000	16	18	34	34	0	34	0	34	34
5,001	7,500	17	25	42	42	0	42	0	42	42
7,501	10,000	18	30	48	48	0	48	0	48	48
10,001	15,000	18	39	57	57	0	57	0	57	57
15,001	20,000	19	43	62	62	0	62	0	62	62
20,001	25,000	20	47	67	67	0	67	0	67	67
25,001	30,000	20	52	72	72	0	72	0	72	72
30,001	35,000	21	62	83	83	0	83	0	83	83
35,001	40,000	23	76	99	99	0	99	0	99	99
40,001	45,000	23	80	103	103	0	103	0	103	103
45,001	50,000	24	84	108	108	0	108	0	108	108
50,001	70,000	24	84	108	108	0	108	0	108	108
70,001	250,000	24	84	108	108	0	108	0	108	108

Tariff selected: Business Bouquet Tariff.

1<sup>st</sup> Signatory

2<sup>nd</sup> Signatory (For multiple directors/signatories)

Name Anthony Mahia Wangi Name .....

Designation Business proprietor Designation .....

Signature [Signature] Signature .....

Date 12/05/2025 Date .....

# M-PESA SERVICE APPLICATION FORM

Safaricom Limited  
Safaricom House, Waiyaki Way  
P. O. Box 66827 - 00800, Nairobi  
Email: Lipanampesa@safaricom.co.ke  
Tel: +254 722 002 222  
www.safaricom.co.ke

Serial  
No. 00000

## Company Profile

Company name: BIN MAN KENYA  
Physical address of company: KAZIADO, KITENGELA  
Postal address: ..... Postal code: .....  
Official Telephone No.1: 0745 068376 Official Telephone No.2: .....  
Official email address: anthony@sikika-ke.co.ke Town: .....  
V.A.T number: ..... PIN number: A009383191A  
Type of business: Sole proprietor Region: .....  
Trading for: Years 5 Months ..... Proposed name for M-PESA account: BIN MAN

## Type of service requested (Tick relevant box)

Paybill ☒ Buy Goods ☐ Aggregated Paybill ☐

## Reason for M-PESA

Collection of funds ☒ Describe the reason: garbage collection service

## Contact details

Name of contact person: Anthony Mahia Wangari  
Email address: anthony@sikika-ke.co.ke Telephone number: 0745068376  
Name of finance contact: .....  
Email address: ..... Telephone number: .....  
Name of administrator: .....  
User name: Anthony Email address: anthony@sikika-ke.co.ke

## Payment details: Where would you like to receive funds collected? (Tick one)

☐ M-PESA (Not recommended for collections above KShs. 100,000 per day)

Name (As registered in M-PESA): .....  
M-PESA registered mobile number: ..... ID number: .....

☒ Bank account\*

Name of bank: Family Bank Branch: Kitengela  
Account name: Anthony Mahia Wangari Account number: 07000022508

\*Banks that are not on Real Time Settlement require a minimum of Ksh. 35,000 per settlement. Please consult your bank to confirm if they are on Real Time Settlement.

Would you like to nominate a mobile number that will be authorised to request withdrawals via USSD (\*234\*4#)? ☒ Yes ☐ No  
If yes, indicate the nominated M-PESA registered mobile number: 0745068376 ID Number: 33452550  
(Attach authorisation letter from the company and copies of ID for signatories)

## Customer declaration

Signed this: 12 day of MAY 2025 Location: Kitengela Kajiado  
Authorised signatory name: Anthony Wangari Designation: Proprietor Signature: [Signature]  
2nd signatory name: ..... Designation: ..... Signature: .....  
By signing this form, I/We accept the terms and condition for M-PESA services.

## For official purpose only

Account Manager: ..... Sales Executive: .....  
Sector: ..... Territory Manager: .....

Form to be returned to Enterprise Business Unit, Safaricom House.

NOTE: Information provided on this form will be used to set up your M-PESA account.

Safaricom reserves the right to accept or reject this request. Terms and Conditions apply.

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