



Administrator reactivation request form - FNB Online Banking Enterprise™

This section to be completed by the FNB Online Banking Enterprise™ Client

Date: Thursday 06 Oct 2022 @ 14:56:307

FOR ATTENTION: FNB Online Banking Enterprise™ Administration

I/We the undersigned hereby declare that (company name) _____ (registration number) _____ ("the company") is party to the Online Banking Enterprise™ Electronic Services Agreement ("the agreement") with First National Bank of Swaziland Limited ("the Bank").

Details

Support Number
18230533

User ID
banel@mastech.co.sz

E-mail Address
smelanebanel@gmail.com

Name

ID Number
9006226100202

UCN
3242512502

Customer Contact Number: (_____) _____

Furthermore, the Administrator has revoked them self from FNB Online Banking Enterprise™ and the company hereby requests reactivation of the Administrator.

The company acknowledges that this form shall be sent by either fax or electronic mail and First National Bank of Swaziland Limited (the Bank) shall act on this request received by fax or electronic mail. The company understands and accepts the risks associated with sending this instruction by fax or electronic mail. Should this instruction be intercepted, modified or not be clear to the Bank, through no fault or negligence of the Bank, the Bank will not be liable for any loss caused by such interception, modification or misinterpretation of this instruction. The company accepts this and indemnifies and instructs the Bank to act on this instruction sent by fax or electronic mail.

Customer Authorised Signatories according to the Resolution and Mandates

Name

Name

Signature

Signature

PLEASE FAX OR EMAIL THE COMPLETED FORM TO FNB ONLINE BANKING ENTERPRISE™ ADMINISTRATION:

Swaziland +268 518-5523
CallCentreSWZ@FNB.co.za

The FNB Online Banking Enterprise™ Administration team will notify you when your re-activation has been completed.

FOR ONLINE BANKING BACK OFFICE USE ONLY

I hereby confirm that:

The Administrator Reactivation Request has been presented and signed in terms of the Resolution passed by the Company/Declaration of Sole Proprietor/Declaration of a Partnership or Mandates held at the branch.

Name

Name

Signature

Signature

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