

DUDU SACCO SOCIETY LTD

DUSCO PESA MOBILE BANKING APPLICATION FORM

(PLEASE COMPLETE DETAILS IN CAPITAL LETTERS. ALL FIELDS ARE MANDATORY)

Full Names _____

ID No. _____

Employee/PNo _____

Member No. _____

Account Name: Dusco Pesa Account _____

Email Address. _____

Mobile Number: _____

I wish to subscribe for the following services:

- Enquiries (Customer Care, Savings, Shares, Loans, Investments, Guarantors, Next of Kin, etc)
- Alerts (Salary, Deposits, Withdrawals, etc)
- Loans (Application and Guarantee)
- Funds Transfer (MPESA, Accounts to Account, etc)
- Pay Bill (Water, Electricity, School Fees, DSTV, ZUKU, etc)

DECLARATION BY THE APPLICANT

I hereby apply for QFS M-Banking from Dudu Sacco Society Ltd. I warrant that the information given above is the true and complete and authorize you to make any enquiries necessary in connection with the application. I accept and agree to be bound by the conditions of use. I agree that I am liable for all charges incurred through the use of this facility. I hereby indemnify the Society against all losses, which may occur as a result of my use of this facility. I understand that the Society reserves the right to decline the application without giving reasons.

Signature: _____ Date _____

FOR OFFICIAL USE ONLY

Verified by: _____ Date _____

Approved by: _____ Date _____