





# ΕΘΝΙΚΗ ΤΡΑΠΕΖΑ ΤΗΣ ΕΛΛΑΔΟΣ (ΚΥΠΡΟΥ)

Place and Date: .....

Please approve our hereinabove request to change the OTP (one-time password) generation method for the abovementioned authorized user.

The hereinabove information has been checked for completeness and accuracy and this application is hereby approved.

**NATIONAL BANK OF GREECE (CYPRUS) LTD  
BRANCH .....**

.....  
Legal entity's seal and legal representatives signatures

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*(\*) Mandatory field - To be completed by the customer*

FOR INTERNAL USE: Date: ----- Method: SMS <input type="checkbox"/> Mobile OTP Application <input type="checkbox"/> E-mail <input type="checkbox"/>
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