ΕΘΝΙΚΗ ΤΡΑΠΕΖΑ ΤΗΣ ΕΛΛΑΔΟΣ (ΚΥΠΡΟΥ)

BRANCH: …… **CIF*:** ……

INTERNET BANKING

Legal entity's application to change the OTP (One -Time Password) Generation Method

Legal entity's details (Company/Organization)

Name: …..……..……..……..……..……..……..……

Reg. No: …….……..…. Reg. Date: ……..…… Country: …….....

Authorized user

Surname…… Name: ……

Identity/Passport no.: ……User Id (*): ……

Only one method can be enabled, so please specify the preferred method with ☒.

****OTP (One -Time Password) Generation Method**

☐ **Method A** - Via SMS Message

Complete the mobile phone number where the OTP will be sent:

Country Code	Mobile Phone No.
0 0	

☐ **Method B** - Via Mobile OTP Application

Complete the mobile phone number to activate the mobile application

Country Code	Mobile Phone No.
0 0	

(*) To be completed by the Branch

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

…… ……..

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

FOR INTERNAL USE:

Date: ----------

Method: SMS ☐ Mobile OTP Application ☐