

BRANCH: 578		CIF:
INTERNET BANKING		
Application by an Individual for Activation / Deactivation of 'Secure Messages Submission' service		
Activation		Deactivation
Individual's Particular	rs:	
		Name:
Authorized Contact Person Details:		
Surname:		
Place and date:		Place and date:
Please approve my hereinabove application for activation/deactivation of 'Secure Messages Submission' Service. I recognize that for the completion of secure messages submission via Internet Banking, One - Time Password (OTP) input is required.		The hereinabove information given by the customer has been checked for completeness and accuracy and this application is APPROVED.
In the case that I have not defined already the method for generating and/or receiving One-Time Passwords (OTPs), please send these passwords via SMS message to my mobile phone number designated below:		
Country Code	Mobile Phone No.	
		NATIONAL BANK OF GREECE S.A CYPRUS BRANCH
(Customer's signature)		

(*) Mandatory field –To be completed by the customer.

CLASSIFIED 4180.E.4851B Version 1.0 Page 1 of 1