

ΕΘΝΙΚΗ ΤΡΑΠΕΖΑ

BRANCH: CIF:	
INTERNET BANKING	
Legal Entity's Application for Activation/Deactivation of 'Secure Messages Submission' service	
Activation	Deactivation
Legal entity's details:	
Name:	
User's Personal Information:	
Surname: Name: Identity/Passport no: User Id (*): Authorized Contact Person Details:	
Surname:	
Place and Date:	Place and Date:
Please approve our hereinabove request for activation/deactivation of 'Secure Messages Submission' Service for the abovementioned individual (user). We recognize that for the completion of secure messages submission via Internet Banking, One - Time Password (OTP) input is required. In the case that we have not defined already the method for generating and/or receiving One-Time Passwords (OTPs), please send these passwords via SMS message to the mobile phone number designated below:	The hereinabove information given by the customer has been checked for completeness and accuracy and this application is APPROVED.
Country Code Mobile Phone No.	
(Legal Entity's seal and legal representatives signatures)	NATIONAL BANK OF GREECE S.A. (Cyprus Branch) BRANCH

(*) Mandatory Field - To be completed by the customer.