



BRANCH (*)

CIF (*).....

INTERNET BANKING

Application by a Group of Customers for cancellation of a registered Internet Banking user

Group Name:

Legal Entities' or/and Individuals' Particulars composing the above Group:

Legal Entities' or Individuals' Names	Id Type (**)	Id No.	CIF (*)

()** Complete: “1” for Cyprus Identity card, “2” for Passport, “3” for Company Registration No.**User's Personal Information:**

Surname: Name: Father's name:
 Id Number: User Id***:

Representative's particulars:

Surname: Name: Father's name:
 ID Type: Id no:
 Issued in: Date of issue: Expiry Date:
 Mobile no: Tel. no: E-mail:

(* To be completed by the branch (*) Mandatory field**

Please approve our request for the cancellation of the abovementioned individual (user) from being a user, on behalf and for the account of our group, of the services through the alternative networks, in accordance with the Terms and Conditions of our Agreement with National Bank of Greece (Cyprus) Ltd for the supply of such banking services.

Place and date:

The above information has been checked for accuracy and the herein request is hereby APPROVED.

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

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Place here the seal of each company of the Group as the legal representative's signatures.