



ΕΘΝΙΚΗ ΤΡΑΠΕΖΑ ΤΗΣ ΕΛΛΑΔΟΣ (ΚΥΠΡΟΥ)

BRANCH:

INTERNET BANKING

Application by an Individual for the provision/replacement of i-code device of the attorney

New device

☐

*Replacement of device

☐

Individual's particulars (grantor) – (CIF:)

Surname: Name:

Id Type: Id number:

Attorney's particulars (i-code device owner details) – (CIF:)

Surname: Name:

Identity/Passport No.: User Id (**):

Reason for replacing the i-code device:

☐ Lost / Stolen

☐ Defective

Place and date:

Please accept my application for the provision/replacement*** of an i-code device for the abovementioned attorney.

I understand that it is the attorney's responsibility to take delivery of the new i-code device.

I hereby acknowledge that defective devices can only be replaced after their return to the Bank.

In order for you to cover your expenses for the replacement of the i-code device, I hereby authorize you to charge my account with you no.:

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

NATIONAL BANK OF GREECE (CYPRUS) LTD
BRANCH

.....
(Grantor's signature)

(*) In case 'replacement of device' is selected, the reason for replacing the device should be clearly defined on the application.

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

(***) Strike any information not applicable