

BRANCH:	CIF:
INTERNET BANKING	
Legal entity's application for the provision/replacement of i-code device	
New device *Rep	lacement of device
Legal entity's details (Company/Organization)	
Name:	
Reg. No: Reg. Date:	Country:
Authorized user of i-code device	
SurnameName:	
Id Type: User Id (**):	
Authorized representative	
Surname:	
Id Type:Tel. No:	
Reason for replacing the i-code device:	
Lost / Stolen	
Defective device	
	Place, Date:
Please accept our application for the	The hereinabove information has been checked for
Please accept our application for the provision/replacement*** of an i-code device of the hereinabove authorized user who has been appointed by us to make use of the Services and perform transactions on our	completeness and accuracy and this application is hereby APPROVED.
behalf and for our account.	NATIONAL BANK OF GREECE (CYPRUS) LTD
Our abovementioned authorized representative shall take delivery of the new i-code device at this Branch.	BRANCH
We 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 we hereby authorize you	
to charge our account with you no.:	

Legal Entity's seal and legal representatives' signatures

(*) 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