

Office Use: Application No

[Empty box for Application No]

NSB Internet Banking

APPLICATION FORM

Personal Account Holders (Local & Overseas)

Please Use BLOCK LETTERS

(01). Title: Rev. / Dr. / Mr. / Mrs. / Miss.

Date: dd / mm / yyyy

(02). Name of Applicant (with initials):

(03). Gender: Male / Female

(04). Email Address:

[Greyed out email address field]

(05). NIC / Pass Port Number: _____ (06). Date of Birth: dd / mm / yyyy

(07). Mobile Phone No: _____ (08). Telephone No: _____

(09). Preferred Usernames:

[Greyed out usernames field]
username1, username2, username3

(10). Residence Address (Local / Overseas): _____
(To send the authentication code Mailer)

(11). Signature of Applicant: _____

Required Facilities: Balance Inquiry Bill Payments Fund Transfer

(A.) Account Numbers - Details of Accounts to be operated under the NSB - Internet Banking Facility

We have no objection in operating the accounts mentioned in this application by Rev. / Dr. / Mr. / Mrs. / Miss. _____
(Joint account holders hereby should give their consent on signing below)

(I). Own Accounts - NOTE: Please obtain the verification of the account details from the relevant branch

Primary Account	Account Number & Branch		Branch Manager's Name and Signature	Rubber Stamp
	Joint Name & Signature			
	Postal Address			

1	Account Number & Branch		Branch Manager's Name and Signature	Rubber Stamp
	Joint Name & Signature			

2	Account Number & Branch		Branch Manager's Name and Signature	Rubber Stamp
	Joint Name & Signature			

3	Account Number & Branch		Branch Manager's Name and Signature	Rubber Stamp
	Joint Name & Signature			

4	Account Number & Branch		Branch Manager's Name and Signature	Rubber Stamp
	Joint Name & Signature			

5	Account Number & Branch		Branch Manager's Name and Signature	Rubber Stamp
	Joint Name & Signature			

(II) Beneficiary's (third party) savings Accounts (Fund transfer only)

	Account Number	Branch	A/c holder's name
1			
2			
3			

(B.) Issue of Password Mailer - (Please mark ✓ for you selection)

- Please send my Authentication Code Mailer to my local address through Registered Mail.
- Please send my Authentication Code Mailer to my overseas address through courier and I agree to pay courier charges.

(C.) Declaration of the USER

I hereby confirm that the above details are true and correct. I further confirm that I have read and understood the terms and conditions governing the NSB Internet Banking Facility. I hereby agree to abide by the terms and conditions and subsequent amendments variations or changes thereto which may at any time be made by the Bank with or without notice to me.

Date: _____ Signature of the Applicant: _____

NOTE: The customers who are living overseas should submit their applications having certified the authenticity of their signatures by an authorized Embassy/Mission Official of Sri Lanka and should accompany a copy of the passport. These applications also should be referred to a branch where he or she maintains the primary accounts as stated in the application.

Date: _____ Signatures/ Seal of authorized Embassy/Mission Officer: _____

(FOR BANK USE ONLY)

Attestation of the Customer's Signature

I certify that the above **primary account/s** is maintained by Rev. / Dr. / Mr. / Mrs. / Miss. _____ at our branch and that signature has been verified with the mandate.

Date: _____ Signature of the Branch Manager: _____

1. To be completed by the **Branch** before sending the application to the Head Office for Processing

	Application Checked By	Data Entered by
Name		
Designation		
Signature		
Date		

Rubber Stamp

2. Approved issuing of NSB Internet banking facility PIN Mailer (Authentication Code).

Date: _____ Manager Card Centre: _____