



# Mobile Banking & Mobile App Application / Amendment Form

Service type (Tick preferred service)  MOBILE BANKING  MOBILE APP

Request type (Tick preferred request type)  NEW (Applying for Mobile Banking for the first time)  AMEND (Existing customer applying for changes)

PIN RESET (Existing customer applying for PIN reset)  CANCEL (Existing customer applying to deregister from Mobile Banking)

Mobile Service type (Tick ONLY 1 preferred service provider)  Digicel  Bmobile

**Instructions:**  
Please read carefully through the application and fill in your necessary information. Applicant must be over 12 years of age.

**PRINT IN BLOCK CAPITALS and complete all sections.**

Please obtain a copy of BSP Electronic Banking Terms & Conditions at your branch or log on to: [www.bsp.com.pg](http://www.bsp.com.pg)

**Section A: Customer Details**

Mr  Ms  Miss  Mrs

Name:  Surname:

Account Number:  CIF Number (BANK USE):

Phone Number: +675  Email Address:

Postal/ Employment Address:

Home/ Residential Address:

Current Profession:

**Section B: Linked Mobile Phone**

(Tick ONLY 1 preferred service provider)

I agree that all my linked account(s) will be accessed/not accessed by this mobile number.

Add Mobile Number:   Delete Mobile Number:

**Section C: Declaration**

a) I acknowledge that I have read and understood the BSP Electronic Banking Terms and Conditions found at [www.bsp.com.pg](http://www.bsp.com.pg) or obtained from a BSP Branch and by executing this document, I agree and am bound by the BSP Electronic Banking Terms and Conditions in my use of the Mobile Banking Service.

b) I also acknowledge that the service provided by the Bank and my obligations under this agreement, in respect of the accounts nominated in this agreement are subject to the terms and conditions governing those accounts.

c) I acknowledge that my first use of the Mobile Banking facility will indicate my acceptance of those BSP Electronic Banking Terms and Conditions.

Customer Image:  Signature:  Date:

**BANK USE ONLY**

**Branch Section**

Confirm all account(s) are linked to customer & recipient's CIF/Z Card

Verified that all account(s) a'one(1) to sign authority

Verified customer's signature.

Confirm that customer has activated for Mobile Banking

Branch Officer's signature:

Date:  Name:

**Branch Section**

Verified customer's signature

Authorising Officer's signature:

Date:  Name:

**2nd Day Check Branch Compliance Officer**

RBanking Maintenance Report

Check Application Form

Compliance Officer's signature:

Date:  Name:

Use your User ID to activate your Mobile Banking service (e.g. \*131\*123\*User ID# & press send)

Your User ID: