



**DASHEN BANK  
PAYMENT CARD DEPARTMENT**

**Application Date**

<b>Registered Name</b>	
<b>Trade Name</b>	

**Nature of Business in Detail**

\_\_\_\_\_

\_\_\_\_\_

**Business Type**     Sole Proprietorship     Partnership     Corporation  
 Governmental Organization     Other \_\_\_\_\_  
*(Please attach the necessary legal documents)*

Number of years in business \_\_\_\_\_

Number of Branches \_\_\_\_\_

Number of Terminals Required \_\_\_\_\_

Standalone \_\_\_\_\_

Portable \_\_\_\_\_

<b>Address</b>	<b>Sub City</b>	<b>Kebele</b>	<b>H.No.</b>
	<b>Telephone No.</b>		
	<b>Fax No.</b>		
	<b>P.O.Box</b>		
	<b>Number of operating Years in this location</b> _____		

**Banking Details with Dashen Bank**

<b>Account Number:</b>	<b>Area Bank:</b>
1. _____	_____
2. _____	_____
3. _____	_____

**Contact Details:**

<b>Primary Contact Person (person applying)</b>	<b>Secondary Contact Person</b>
Name	Name
Tel.	Tel.
Mobile	Mobile
Email	Email
Signature	

**For Bank use Only**

**Recommendation** \_\_\_\_\_

\_\_\_\_\_

**Recommended by** \_\_\_\_\_ **Approved by** \_\_\_\_\_

\_\_\_\_\_