

جديد  
New ☐تحديث  
Update ☐حذف  
Delete ☐

## Customer Details

## معلومات العميل

اسم الشركة  
Company Name \_\_\_\_\_ص.ب  
P.O.Box \_\_\_\_\_ هاتف  
Tel. \_\_\_\_\_ CR No. \_\_\_\_\_

## Company Contact Details

## معلومات الاتصال بالشركة

وجهة الاتصال الاولى السيد/السيدة  
Primary Contact person Mr. / Mrs. / Ms. \_\_\_\_\_الصفة / الوظيفة  
Title / Designation \_\_\_\_\_ الجوال  
Mobile \_\_\_\_\_ بريد الإلكتروني  
Email Address \_\_\_\_\_وجهة الاتصال الثانية السيد/السيدة  
Secondary Contact person Mr. / Mrs. / Ms. \_\_\_\_\_الصفة / الوظيفة  
Title / Designation \_\_\_\_\_ الجوال  
Mobile \_\_\_\_\_ بريد الإلكتروني  
Email Address \_\_\_\_\_

## Account Operating Instruction

## معلومات تشغيل الحساب

Additional Instructions معلومات إضافية

If the authorized signatory is single, kindly mention in operating instruction field.

إذا كان المفوض بالتوقيع منفرد، يرجى ذكر ذلك في خانة تعليمات التشغيل

Account Mandate

Single ☐ منفردJoint ☐ مشترك

حساب التفويض

Category	الفئة	Amount From	المبلغ من	Amount To	المبلغ إلى

User Setup

معلومات المستخدم

\* Kindly indicate the user group in case the user is an authorizer, in case of more users; kindly ask for addendum sheet.

\*\* In case of allowing one particular payment type please mention else, by default all payment types will be allowed

\*\*\* In case of choosing Hierarchical option, make sure the authorizers order is mentioned

تسلسل المستخدم

User Sr.

User Full Name

إسم المستخدم الكامل

1

Account Statement

Account Summary

Card Statement

Online Merchant Statement

Cheque Inquiry

Payment Inquiry

Balance Order Inquiry

Fixed Deposit Inquiry

Loan Account Inquiry

Credit Facility View

Standing Instructions

Beneficiary Library

Balance Order inquiry

Utility Payments

Tax Payment (GTA)

Salary Payments

WPS Payments

Batch Payments

Bulk Payments

Authorizer Group (X) if singly

Authorizer order (if hierarchical)

Actions

Add

Modify

Delete

Roles

Inquiry

Input

Verifier

Authorizer

Account Number

Credit Card Number

Merchant ID

Group Category

Mobile No.

Email Address

2

Account Statement

Account Summary

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Authorizer Group (X) if singly

Authorizer order (if hierarchical)

Actions

Add

Modify

Delete

Roles

Inquiry

Input

Verifier

Authorizer

Account Number

Credit Card Number

Merchant ID

Group Category

Mobile No.

Email Address

Users details addendum attached

Service Fees

Authentication Type

OTP

MOBILE TOKEN/MAS

The management accepts full responsibility for all actions taken on the Cash Management System accessed through their User ID and Password combination. The authorized users are obligated, by signing

Below, to follow all QNB policies, procedures, standards and practices with regard to Information Security and Customer Confidentiality.

Company Authorised Signatory

Name

Signature

Date

Name

Signature

Date

For Bank Use

Company's Signature Verified by

I hereby confirm that the ebusiness set-up for the above request was completed.

Processed by

Signature

Date

Authorised by

Signature

Date