Machhapuchchhre Bank

Annexure-2

MBL Additional Merchant Application Form for Digital Payment services

Date: …………………………………….

I/We hereby request the Bank to enroll me/us to accept Digital Payment services and provide the appropriate merchant ID/Terminal ID required for the same as Sub-merchant or additional services required: (Note: all the fields are mandatory.)

Current Account Number: …………………………………………………………………

Name of Merchant: ……………………………………………………………………………

PAN no: ☐☐☐☐☐☐☐☐☐

Information for Sub-merchant or additional service for POS and QR:

S.N	Outlet Name	Outlet In-charge	Mobile no	Email address	Location

Information for Sub-merchant Terminal creation or additional service:

Sub–merchant Name: _____

S.N	Outlet Name	Outlet In-charge	Mobile no	Email address	Location

TERMS AND CONDITIONS:

By signing the application form, the merchant understands and agrees to abide by all the terms and conditions of the MBL Merchant application form for Digital Payment services also merchant is solely responsible for any financial cost involved during integration with its billing Vendor for generation of Dynamic QR/POS.

_____
Authorized Signature/s and Stamp