



KEPSS SMART CARD CERTIFICATE RENEWAL REQUEST FORM

1. BANK NAME _____
2. BANK ACCOUNTNUMBER _____
3. SWIFT BIC CODE _____
4. DATE OF REQUEST _____

REQUEST FOR:

SMART CARD CERTIFICATE NAMES (S) _____

*Please indicate the **NAME** on each smart card delivered on the date of request specified above*

NAME OF 1st AUTHORISED BANK SIGNATORY	_____	NAME OF 2nd AUTHORISED BANK SIGNATORY	_____
JOB TITLE	_____	JOB TITLE	_____
TELEPHONE:	_____	TELEPHONE:	_____
SIGNATURE:	_____	SIGNATURE:	_____
DATE	_____	DATE	_____

OFFICIAL STAMP

*NB: Please complete this form and return it to the KEPSS Help Desk, Central Bank of Kenya **with** the smart card(s)*