



National Bank of Malawi plc

NBM-Visa POS Merchant Application Form

Merchant Information

Name of Merchant _____

Trading As _____

Mailing Address _____

Physical Address _____

Telephone No. _____ Fax No. _____ Email: _____

Years in Business _____ How Long at this Location _____ TPIN _____ Number of locations _____

Type of Business Retail Restaurant Wholesale Lodging Other

Describe the merchandise sold or service provided _____

Type of Ownership Sole Ownership Partnership Joint Venture Corporate Other

Primary Merchant Contact (Owners or Officers)

Name _____ Title/Designation _____ Cell Phone: _____

Residential Address _____ Home Telephone No. _____

Former Address _____ Valid ID No. _____

Refund Policy

Applicable Refund Policy Cash Exchange Store Credit

Bank Details

Account No. _____ Account Name _____ Service Centre Name _____

Authorized Signatory _____

Authorized Signatory _____

For Bank Use

Merchant Name _____ Input By _____
Merchant Code _____ Operator Phone _____
MCC _____ Bank Representative _____
Suspense/Ac No _____ Account Type _____
Terminal IDs _____ Bank Representative _____