

# SHORT - TERM PAYBILL



## SHORT TERM PAYBILL ACCOUNT APPLICATION FORM

### Applicant/Beneficiary Details

Name of Applicant \_\_\_\_\_  
Physical Address \_\_\_\_\_  
Postal Address \_\_\_\_\_ Postal Code \_\_\_\_\_ Town \_\_\_\_\_  
Personal Mobile Number \_\_\_\_\_ Email Address \_\_\_\_\_  
Passport/National ID No. \_\_\_\_\_ PIN No. \_\_\_\_\_

### Applicant Details (if applying on behalf of beneficiary)

Name of Person/Group Applying \_\_\_\_\_  
Physical Address \_\_\_\_\_  
Postal Address \_\_\_\_\_ Postal Code \_\_\_\_\_ Town \_\_\_\_\_  
Contact Mobile Number \_\_\_\_\_ Email Address \_\_\_\_\_  
Passport/National ID No. of Contact Person \_\_\_\_\_ PIN No. \_\_\_\_\_

### Short- term Paybill Account Details

Proposed Name of Account \_\_\_\_\_

### Reason for Service Requested (tick relevant box)

Reason  Medical Fund  Education Fund  Wedding  Funeral  Other \_\_\_\_\_  
Duration of Use  1 Month  3 Months  6 Months  
New Safaricom number to receive SMS notifications of payment \_\_\_\_\_

### Relevant Certified Documents Attached

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
5 \_\_\_\_\_  
6 \_\_\_\_\_  
7 \_\_\_\_\_

### Payment Details - Bank Account

Account Name \_\_\_\_\_ Authorized Signature \_\_\_\_\_  
Bank \_\_\_\_\_ Branch Name \_\_\_\_\_  
Account Holders Name \_\_\_\_\_  
Account Number 

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### Customer Declaration

Signed this.....day of.....20..... Location.....  
Authorized Signatory name..... Signature.....  
Designation of Authorized Signatory .....

Authorized Signatory name..... Signature.....  
Designation of Authorized Signatory .....

### NOTE:

Form to be returned at Safcom Retail Centre attached to certified copies of documents required to open the account  
This account shall not be used for any other activity other than the one specified above.  
Safaricom has the right to withhold funds on grounds of suspicious activity  
Terms and conditions apply  
Safaricom reserves the right to accept or reject this request

**For Safaricom Use Only**

Short - Term Paybill Number

Finance Contact

Transaction Terminal No.

M-PESA Contact

