



M-PESA AGENT NEW STORE / ADDITIONAL TILL APPLICATION FORM

Company Name:				Primary Assistant (Attach Copy of ID)		Contact No.	Province / Region
New Store (√)	Extra Till (√)	Town	Physical Location of Store	Name	ID Number		

Application/s Brought By: Signature:Official Stamp

Application/s Received By:Signature:Date:

Thank you for your application. We will process your documents and get back to you incase of any queries. In the event that you have any queries regarding your application, please contact the Area Sales Managers as per Bulletin 76 or email mpesaagentadmin@safaricom.co.ke