

PESALINK LIMIT AMENDMENT FORM

Date.....

To the Manager,
African Banking Corporation Ltd,
..... Branch

Customer Details

Customer Name.....
Account Number.....
ID/Passport Number..... Business Registration Number.....
Telephone Number..... Email Address.....
Postal Address.....Physical Address.....

Limit Details

Please indicate the preferred limit below: **Maximum Pesalink limit is Kes 999,999**
I would like to amend my Pesalink limit as below;

Current Limit (Kes) New Limit (Kes).....

Type of Limit: Permanent ☐ Temporary ☐

If temporary, indicate period: FROM..... TO

I/We hereby understand and acknowledge the risk involved in enhancing the limit and am/are fully aware that the bank would not take any liability or responsibility for any lose that may arise due to the same and am/we are requesting at my/our sole risk.

Data Protection Privacy Notice

The information that you input here shall be retained by us strictly for our own use in line with the Data Protection Act No. 24 of 2019, our Privacy Policy and the Privacy Notice and I consent to the application of the Data Protection Act No. 24 of 2019 and the Bank’s Privacy Policy and the Privacy Notice to all information provided to the Bank. This Privacy Notice may be updated from time to time and the most recent version can be found on our website or with our customer care repre-sentative. If you would like any further information contact our Data Protection Officer or kindly contact us at ABC Bank House, Woodvale Grove, Westlands, P. O. Box 38610 – 00800, Nairobi addressed ‘for the attention of the DPO’.

Customer Name..... Signature..... Date.....

Customer Name..... Signature..... Date.....

Customer Name..... Signature..... Date.....

For Official Use

Receiving Officer’s Name.....Designation.....Signature & Stamp.....Date.....

Approving Officer’s Name.....Designation.....Signature & Stamp.....Date.....

Branch Stamp