



mCash Service Request Form

Network partners



Mandatory Questions*

Service Requirement

1. Required Service	Registration <input type="checkbox"/>	Account Closure <input type="checkbox"/>	Pin Reset <input type="checkbox"/>	Account Statement <input type="checkbox"/>
2. Purpose of using mCash*	Salary Disbursements <input type="checkbox"/>	Shopping <input type="checkbox"/>	Business Transactions <input type="checkbox"/>	Fund Transfers <input type="checkbox"/>
	Pay Utility /Institutional Bills <input type="checkbox"/>	Loan Purposes <input type="checkbox"/>		
3. Upgrade to Enhanced	Yes <input type="checkbox"/>	No <input type="checkbox"/>	4. Reasons for Upgrade or Downgrade* <input type="text"/>	
Downgrade to Basic	Yes <input type="checkbox"/>	No <input type="checkbox"/>		

Personal Information

5. National ID*	<input type="text"/>	6. Mobile No.*	<input type="text"/>
7. Nationality*	<input type="text"/>	8. Date of Birth*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
9. Title* Ms <input type="checkbox"/> Mr <input type="checkbox"/> Rev <input type="checkbox"/>	10. Gender* M <input type="checkbox"/> F <input type="checkbox"/>	11. Country of Birth* <input type="text"/>	
12. Full Name as in NIC or Passport* <input type="text"/>			
13. First Name* <input type="text"/>			
14. Last Name* <input type="text"/>			
15. Permanent Residential Address (as per Identification Document)*			
City/Town	<input type="text"/>	District	<input type="text"/>
		Postcode	<input type="text"/>
16. Billing/Notification Address (if different from Permanent Address)			
City/Town	<input type="text"/>	District	<input type="text"/>
		Postcode	<input type="text"/>
17. Contact Details	Tel <input type="text"/>	Email	<input type="text"/>
18. Occupation* <input type="text"/> Name of Employer <input type="text"/>			
Address of Employer <input type="text"/>			
19. Mother's Maiden Name (Security Question)* <input type="text"/>			
20. Are you a Politically Exposed Person (PEP)?* Yes <input type="checkbox"/> No <input type="checkbox"/>		21. Are you a family member/close associate of a PEP?* Yes <input type="checkbox"/> No <input type="checkbox"/>	
22. If field 21 is Yes, name the related/associated PEP and nature of relationship/association to PEP* <input type="text"/>			
23. Preferred language for communication* English <input type="checkbox"/> Sinhala <input type="checkbox"/> Tamil <input type="checkbox"/>			

Other Information

24. Source(s) of income*	Salary Income <input type="checkbox"/>	Investment Income <input type="checkbox"/>	Savings/Family Income <input type="checkbox"/>
	Donations <input type="checkbox"/>	Business Income <input type="checkbox"/>	Remittances <input type="checkbox"/>
25. Customer's estimated monthly income*	<input type="text"/>		

Declaration

26. I confirm that the information provided by me is true and correct and the mobile number is registered in my name, I also confirm that I have read and understood the Terms and Conditions available at www.mobitel.lk and the terms and conditions of mCash service available at www.mcash.lk and intend to be bound by the same.

Date Signature

Office use only

27. Proof of ID copy	NIC <input type="checkbox"/>	Driving Licence <input type="checkbox"/>	Sri Lankan Passport <input type="checkbox"/>	Confirmed Photograph	Yes <input type="checkbox"/>	No <input type="checkbox"/>
28. Proof of address copy	NIC <input type="checkbox"/>	Driving Licence <input type="checkbox"/>	Utility Bill <input type="checkbox"/>	Other	<input type="text"/>	
(27, 28. Tick the appropriate document copy collected as proof of ID and address respectively and such should be verified against its original. For proof of ID, such document must bear the photograph of the customer. If utility bill is provided, mention the type (water, electricity or fixed phone).						
29. Declaration: I hereby declare that the identity and address of the customer were confirmed as indicated above. I have accepted and duly registered/ upgraded/downgraded the customer in mCash service.						
30. Special Remarks <input type="text"/>						
31. Checked by (Emp. No.)	<input type="text"/>	Designation	<input type="text"/>	Signature	<input type="text"/>	
Activated by (Emp. No.)	<input type="text"/>	Designation	<input type="text"/>	Signature	<input type="text"/>	
Touch Point	<input type="text"/>	Date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			

