



T BANK LIMITED POST BOX: 631 THIMPHU: BHUTAN

Please paste your passport size photograph here

POINT OF SALE TERMINAL (GL-11) APPLICATION FORM

10,	Date/
The VAS Department	
T Bank Limited	
Dear Sir/madam,	
We would like to request you to kindly provide POS terminal (GL-11) from your b	ank. The details are as given
below.	anni me accane are as Bren
MERCHANT INFORMATION	
Merchant Name	
Account Number	
Business AddressBusiness License No	
Telephone NoMobileNoMobileNo	
Email Address	
NUMBER OF LOCATIONS WHERE THE POS TERMINAL WILL BE	
(If more than 2 locations please state alongside the form)	. 0325
No of POS required	
Location/Address for POS1	
Location/ Address for POS 2	
(If more than 2 locations, please state alongside the form)	ATIONS
Location/Address for POS 1: Name	
Mobile No	
Location/Address for POS 2: Name	
Mobile No	
DOCUMENTS TO BE ATTACHED	
(i)Copy of citizenship identity card of the proprietor	
(ii) Valid Trade License copy	
Consent and Declaration	
We hereby declare that all the information furnished herewith is correct to the best of	my/our knowledge and
ability and do hereby consent to disclose and share all or share such information requi	red by T bank Ltd
	-
Thanking you,	
(Name and signature of the applicant)	