

**OUTLET APPLICATION FORM**

Agent Name \_\_\_\_\_ Agent No.(for existing Agents only) \_\_\_\_\_  
Application Reference No. \_\_\_\_\_ Date of Application(dd/mm/yyyy) \_\_\_\_\_  
How many outlets are you applying for? \_\_\_\_

**A. OUTLET DETAILS**

Outlet's designated mobile phone number \_\_\_\_\_ **Outlet type:** Super  Mini  Street   
Do you intend to use this number for personal use? Yes  No   
Do you intend to use a computer to serve customers? Yes  No  If Yes give username \_\_\_\_\_

**B. CONTACT & LOCATION DETAILS**

City/ Town/ Market \_\_\_\_\_ MobiKash region \_\_\_\_\_  
Building \_\_\_\_\_ Road \_\_\_\_\_ Street \_\_\_\_\_  
Contact telephone \_\_\_\_\_ Fax number \_\_\_\_\_

**C. ATTENDANT DETAILS**

1. Surname \_\_\_\_\_ Middle name \_\_\_\_\_ First name \_\_\_\_\_  
ID/Passport number \_\_\_\_\_ Telephone (M) \_\_\_\_\_  
2. Surname \_\_\_\_\_ Middle name \_\_\_\_\_ First name \_\_\_\_\_  
ID/Passport number \_\_\_\_\_ Telephone (M) \_\_\_\_\_

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Building \_\_\_\_\_ Road \_\_\_\_\_ Street \_\_\_\_\_  
Contact telephone \_\_\_\_\_ Fax number \_\_\_\_\_

**C. ATTENDANT DETAILS**

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ID/Passport number \_\_\_\_\_ Telephone (M) \_\_\_\_\_  
2. Surname \_\_\_\_\_ Middle name \_\_\_\_\_ First name \_\_\_\_\_  
ID/Passport number \_\_\_\_\_ Telephone (M) \_\_\_\_\_

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ID/Passport number \_\_\_\_\_ Telephone (M) \_\_\_\_\_

**OFFICIAL USE ONLY.**

**1. VETTING**

The following documents will be required if this application is successful. The copies will have to be certified and authorised by a MobiKash Officer as true copies of the original.

No.	Document /Item Requirements.	Super Agent	MobiKash
1	Copy of Business Permits for each Outlet/Branch	<input type="checkbox"/>	<input type="checkbox"/>
2	2 (TWO) Premises Digital Photos, interior & exterior where applicable	<input type="checkbox"/>	<input type="checkbox"/>
3	Copy of IDs for each nominated staff/employee/attendant	<input type="checkbox"/>	<input type="checkbox"/>
4	Copy of staff/employee/attendant KCSE or other post KCSE certificate where applicable.	<input type="checkbox"/>	<input type="checkbox"/>
5	Outlet Commission Payment Form duly filled	<input type="checkbox"/>	<input type="checkbox"/>
6	Outlet Application Form duly filled	<input type="checkbox"/>	<input type="checkbox"/>

Note: Items 1-4 MUST be remitted in SOFT COPY to the recruiting Super Agent

**2. AUTHORISATION.**

**SUPER AGENT USE ONLY.**

Agent Name \_\_\_\_\_ Designation \_\_\_\_\_  
Agent Representative \_\_\_\_\_ Designation \_\_\_\_\_  
Date (dd/mm/yyyy) \_\_\_\_\_ Signature \_\_\_\_\_

**MOBIKASH USE ONLY.**

**Verifying Officer**

Name \_\_\_\_\_ Designation \_\_\_\_\_  
Date (dd/mm/yyyy) \_\_\_\_\_ Authorising Signature \_\_\_\_\_

**Authorising Officer**

Name \_\_\_\_\_ Designation \_\_\_\_\_  
Date (dd/mm/yyyy) \_\_\_\_\_ Authorising Signature \_\_\_\_\_