| C:\Users\Mara Zhanet\Pictures\PAYZ\PAYZ_logo_295px.pngMembership Application |
| --- |
| Applicant Information |
| Registered Name of Organization: |
| Date of Company Registration with Pacra: | Company Certificate Number: | ZRA Certificate Number |
| Current address: |
| City: | State: | ZIP Code: |
|  |  |  |
| KEY Contact  |
| Key Contact Person Name:  |
| Position:  |  |
| Phone: | E-mail: | Cell: |
| City: | State: | ZIP Code: |
| ELIGIBILITY  |
| Is your organization fully designated by the Bank of Zambia Yes No |
| Date of Designation:  | License No. |
| Nature of Business  |
| Please provide a brief profile of your business  |
|  |
|  |
| List of Services PSP is currently providing:  |
|  |  |  |
|  |  |  |
|  |  |  |
| List of directors  |
| Name: | Name: |
| Name: | Name: |
| Signatures |
| I authorize the verification of the information provided on this form to be accurate. |
| Signature of applicant: | Date: |

**PAYMENTS**

**Make All Payments Payable To**

**PAYMENTS ASSOCIATION OF ZAMBIA**

**Bank: First National Bank (FNB)**

**Account Number: 62817376959**

**Branch: Commercial Branch Acacia Park (260006)**

**Swift Code: FIRNZMLX**

**Address: Stand Number 22768 Acacia Park Cnr. of Thabo Mbeki and Great East Road.**

*Please enclose Proof of Payment*