

Organization name:

(1) Enterprise Registration Certificate No.:

fill (1) or (2)

D-U-N-S Number :

(if you have)

(2) Establishment licence No.:

fill (1) or (2)

The Authorized person (Miss/Mr):

Identification /Passport No.:

Mobile telephone number:

(this phone number is registered SEN account)

The Authorized person is entitled on behalf of legal representative
to open and use the account at SEN

ORGANIZATION
(signature, full name,stamp)