

**ACTIVATION / UNBLOCKING/ RE- ACTIVATION OF E-BANKING ACCESS
ACTIVATION OF HARDWARE SECURITY DEVICE**

A. DESIGNATED USER DETAILS:

Full Name:		
Identity Card/Passport No.:	User ID:
Security Device Number:		

B. TYPE OF REQUEST:

REQUEST FOR ACTIVATION

- Activation of e-banking access (user id and password) following the reissuance of e-Banking password).
- Activation of hardware security device.

I hereby acknowledge receipt of the e-Banking credentials (user id and password) and/or the hardware security device.

REQUEST FOR UNBLOCKING/RE-ACTIVATION OF E-BANKING ACCESS

Designated User Signature:

Date:

For activation or reactivation purposes please forward this document duly completed and signed by email to the following email address: ebanking@eurobank.com.cy

FOR INTERNAL USE ONLY		
Place of Application:	Received by:	Date:
Checked and Signature Verified by (1):		Date:
Checked and Signature Verified by (2):		Date:
Accepted and Completed by Centralised Services on		