



«Қазақстан-Зираат Халықаралық Банкі» Еншілес Банкі» АҚ  
"Subsidiary Bank "Kazakhstan-Ziraat International Bank" JSC

**APPLICATION FOR CHANGING THE AUTHENTICATION MEANS**

Customer's name: \_\_\_\_\_

BIN/IIN: \_\_\_\_\_

User \_\_\_\_\_  
(last name, first name, patronymic, IIN, Login, Identity card/Passport)

Select the authentication means you want to change (select as necessary):

Trusted (mobile) number \_\_\_\_\_

EDS issue \_\_\_\_\_

Change to:

Trusted (mobile) number \_\_\_\_\_

EDS re-issue \_\_\_\_\_

First signature Chief Executive Officer	Position _____ Last name, first name, patronymic _____	signature	
Second signature Chief Accountant	Position _____ Last name, first name, patronymic _____	signature	Seal, if any
Date of filling in the application	____ " ____ " _____ 202_		

Executor \_\_\_\_\_  
(last name, first name, patronymic) (signature) (stamp, if any)