



## Credentials Questionnaire: Test

Please complete the below Credentials Questionnaire for the Retailer Account and User you would like created on our Test Platform.

Please submit a separate form for each User.

Retailer Name:  Branch Name:	depending on the credit of the deposit if you are can afford to pay the deposit if you to do so to do so as part of the approximation process, will as part of the approximation your credit history footprint on your credit history and bank deta.  Have your salary, and bank deta.
Representative First Name:	Representative Last Name:
Email:	Telephone:
Branch Address:	
Branch Postcode:	