



Application for DBBL Two Factor Authentication (2FA) Registration

Date:

The Manager

Dutch-Bangla Bank Ltd.

_____ Branch

Subject: Application for DBBL Two Factor Authentication (2FA) Registration

Customer Information:

Customer Name	:	
Account Number / IB Log In ID	:	
Debit Card Number	:	
Credit Card Number	:	
E-mail Address	:	
Mobile Number	:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Two Factor Authentication (2FA) Registration Details:

Token Type	:	<input type="checkbox"/> Hardware Token	<input type="checkbox"/> Software Token	
Purpose	:	<input type="checkbox"/> Internet Banking	<input type="checkbox"/> E-Commerce	<input type="checkbox"/> For Both

■ Hardware Token:

Delivery Mode	:	<input type="checkbox"/> Branch
		Branch Name :
		Branch Code :

■ Software Token:

Device Type	:	<input type="checkbox"/> Desktop/Laptop
		Operating System : <input type="checkbox"/> Windows
		<input type="checkbox"/> Linux (Redhat)

<input type="checkbox"/> Smart Phone
Phone OS:
Phone Device ID:

Customer Signature: _____

Signature Verified by: _____
(Signature & Seal)

Date: _____

Issuing Branch: _____