

APPLICATION FORM FOR THE DECH MEMBERSHIP

F.100

DAR ES SALAAM ELECTRONIC CLEARING HOUSE

(Name and address of the Bank)

Date _____ 20__

The Chairman of Committee of Management,
The Dar es Salaam Electronic Clearing House,
P.O. Box 2939,
DAR ES SALAAM

Dear Sir,

**Sub: Application for membership to the Dar es Salaam
Electronic Clearing House**

1. We hereby apply for membership of the Dar es Salaam Electronic Clearing House, and
2. We further, hereby agree to abide by the Rules and Regulations prescribed by the Dar es Salaam Electronic Clearing House, as they may be changed from time to time.

Thanking you,

Yours faithfully,

(Name of the Bank)

Name _____ Name _____

Signature _____ Signature _____

Title _____ Title _____

Official stamp/seal of the Bank