

BIOMETRIC EXEMPTION REQUEST FORM



UNIVISION SACCO

powering dreams

Biometric Exemption Request Form for Mobile Banking Access

Section A: Member Details

Full Name:	
Membership Number:	
ID/Passport Number:	
Mobile Number:	
Personal File Number:	
Email Address:	

Section B: Request Details

I hereby request to be exempted from biometric authentication in the Sacco system in order to access Mobile Banking Services (U-Cash) via my phone.

Reason for Request (tick as appropriate):

I am unable to visit the Sacco branch for biometric registration

Other (please specify): _____

Declaration by Member

I confirm that the information provided above is true and accurate. I understand that by requesting exemption from biometric authentication, I will be required to undergo alternative verification measures as may be determined by the Sacco.

Signature: _____

Date: _____

For Official Use Only

Received By: _____ Designation: _____ Date: _____

Input by: _____ Designation: _____ Date: _____

Approved By: _____ Designation: _____ Date: _____