



KENTANK APPLICATION FORM

1	. Name	ID NO
2	. Mobile Number Email address	
3	. Credit Card No.:	. (Only first 4 and last 4 digits).
4	. KCB account Number (if applicable)	
5	Kentank Product code selected (if nurchasing only one tank)	Total price

- 6. Please fill below if purchasing more than one tank (Refer to Kentainers price list & take note of your ZONE)

Product Code (CCV xxx)	Quantity	Price
TOTAL		

I authorize KCB Card Centre to debit my credit card account with Kes on a monthly basis for Months on the card due date, being payment for the above Kentank I have chosen.

Repayment period (months)	Tick your selection
3 Months	
4 Months	
5 Months	
6 Months	

I understand that by signing this request, I have agreed to be fully liable in fully paying for the product.

All goods purchased shall be checked before accepting delivery and will remain under manufacturer's warranty for stated period on warranty card.

Describe your nearest town or zone where the tank will be delivered

.....

Signature Date.....

(Customer to sign)

SignatureDate.....

(Card Center official to sign)

FOR OFFICIAL USE ONLY

PAYMENT	AMOUNT (KES)	APPROVAL CODE	SIGN
1 st Instalment			
Balance			