



ECO DESH POWER SOLUTIONS APPLICATION FORM

1. Name			ID NO	
2. Mobile Number .		. Email address		
3. Credit Card No.:		x□□□□]. (Only f	first 4 and last 4 digits).
4. KCB account Nur	nber (if applicable)			
5. Fill the table belo	ow for products/services you a	re purchasing (refer t	to invoice)	
Name of Product(s)/service			Qty	Cost
	Total Cost			
	d Centre to debit my credit can the card due date, being pays	ment for the above E		•
	Repayment period (months)	Tick your selection		
	3 Months 4 Months			
	5 Months			
	6 Months			
	7 Months			
	8 Months			
	9 Months			
	10 Months			
	11 Months			
	12 Months			
I understand that b	y signing this request, I have a	greed to be fully liab	le in fully p	paying for the products.
• •	ised shall be checked before a I period on warranty card.	ccepting delivery and	l will rema	in under manufacturer's
Eco Desh Solution o	outlet	(Where prod	ucts are be	eing purchased)
Signature		Date		
	(Customer to sign)			
Signature		Date		
	(KCB Card Center to sign			

FOR OFFICIAL USE ONLY

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