



## Authorized Representatives

Customer	Authorized Representative No 1	Authorized Representative No 2	Authorized Representative No 3
Name			
Phone no			
Fax no			
E-mail			

Bank	Authorized Representative No 1	Authorized Representative No 2	Authorized Representative No 3
Name			
Phone no			
Fax no			
E-mail			

Services Provider Group 4	Group 4 Authorized Manager No 1	Group 4 Authorized Manager No 2	Group 4 Authorized Manager No 3
Name			
Phone no			
Fax no			
E-mail			

### Group 4 Acknowledgement:

Group 4 hereby acknowledges that upon signing the MashreqSafecash Agreement (Tri-Party) and this Services Level Start-Up Form, that Group 4 has complied with all process specific requirements outlined in the Master MashreqSafecash Agreement. Group 4 further confirms that the Group 4 Crew list provided by Group 4 to the Customer bearing reference number :

dated / / is current and correct.

### Signed on behalf of the Customer by:

Name .....

Name .....

Designation .....

Designation .....

Signature .....

Signature .....

### Signed on behalf of Group 4 by:

### Signed on behalf of Mashreqbank psc by:

Name .....

Name .....

Designation .....

Designation .....

Signature .....

Signature .....

### For Mashreqbank Use Only

Signatures Verified Supporting Documents received Others

Terms used in this Services Level Start-Up Form shall have the meanings ascribed thereto in the MashreqSafecash Agreement (Tri-Party). Account to be debited shall be debited at the end of each Gregorian month for the agreed upon charges. Letter requesting cash delivery to location must reach Mashreq at least two (2) business days prior to receipt of the Cash Cheque.