

SHARED USSD CODE REQUEST FORM

Instructions:

- Form must be duly filled before submission

Key Contacts

Name of applicant		Role	
Mobile Number		Email	
Company Name:			

Tick where applicable

Service Activation	Service Deactivation	Service amendment	Date of Submission

Selected Shared USSD code:

Brief service Description (Purpose)

Call back URL:

REQUIREMENTS

1. Payment confirmation
2. Call back URL
3. 5 mobile numbers for whitelisting
4. USSD application form (form attached below)
5. Pin/VAT certificate
6. Certificate of Incorporation