



## APPLICATION FOR VISA DEBIT CARD

Date

The Manager,  
Amāna Bank,  
\_\_\_\_\_ Branch

I/We hereby authorise and request Amāna Bank to issue the Applicant a VISA Debit Card.

**Note:** Please complete the relevant sections in BLOCK CAPITALS, underline or place a (✓) in the appropriate box and kindly read the section "Terms and Conditions" governing Amāna Bank Debit Card which forms an integral part of this application.

**Each Joint Account Holder is required to submit a separate application to obtain a VISA Debit Card for his/her personal use.**

INFORMATION OF ACCOUNT HOLDER/S		
<b>Full Name of Applicant :</b>	1) Mr / Mrs / Miss / Dr / ____	NIC No. <input type="text"/>
<b>Full Name of Joint Account Holder/s :</b> <small>(Applicable only for Joint Accounts)</small>	2) Mr / Mrs / Miss / Dr / ____	NIC No. <input type="text"/>
	3) Mr / Mrs / Miss / Dr / ____	NIC No. <input type="text"/>
<b>Contact Details of Applicant:</b>	Correspondence Address	Residence Tel. No.
		Mobile
		Office Tel. No.
	E-mail	
<b>Name to Appear on Card :</b>	<input type="text"/> (Maximum 22 Characters)	
<b>Mother's Maiden Name : (for security reasons)</b>	<input type="text"/>	
<b>Accounts to be linked :</b>	<b>Account Type :</b>	<b>Card Collection Branch :</b>
1.) Primary A/C No. : <input type="text"/> <small>(Account to be debited in respect of VISA Electronic transactions)</small>	Savings <input type="checkbox"/> Current <input type="checkbox"/>	
2.) A/C No. : <input type="text"/>	Savings <input type="checkbox"/> Current <input type="checkbox"/>	
3.) A/C No. : <input type="text"/>	Savings <input type="checkbox"/> Current <input type="checkbox"/>	
4.) A/C No. : <input type="text"/>	Savings <input type="checkbox"/> Current <input type="checkbox"/>	

I/We confirm that the information given above is true and accurate. I/We have read, understood and agree to abide by the Terms and Conditions applicable to Amāna Bank Debit Card as detailed overleaf and subsequent amendments, variations or changes thereto which may at any time be made by the Bank.

<b>Signature of Account Holder/s :</b>	1) _____	2) _____	3) _____
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FOR BRANCH USE ONLY	FOR CARD CENTRE USE ONLY																										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"></td> <td style="width: 30%; text-align: center;"><b>Name</b></td> <td style="width: 30%; text-align: center;"><b>Initials</b></td> <td style="width: 10%; text-align: center;"><b>Date</b></td> </tr> <tr> <td>Application checked by _____</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Signature Verified</td> <td rowspan="3" style="font-size: 3em; vertical-align: middle;">}</td> <td colspan="2" rowspan="3" style="text-align: center; vertical-align: middle;">_____ Authorised Officer</td> </tr> <tr> <td>Accuracy of Accounts to be linked</td> </tr> <tr> <td>Identity Verified</td> </tr> </table>		<b>Name</b>	<b>Initials</b>	<b>Date</b>	Application checked by _____				Signature Verified	}	_____ Authorised Officer		Accuracy of Accounts to be linked	Identity Verified	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><b>Card No.</b></td> <td><input type="text"/></td> </tr> <tr> <td style="text-align: center;"><b>EMP No.</b></td> <td style="text-align: center;"><b>Initials</b></td> </tr> <tr> <td>Customer data entered by _____</td> <td>_____</td> </tr> <tr> <td>Card data entered by _____</td> <td>_____</td> </tr> <tr> <td>Card data verified by _____</td> <td>_____</td> </tr> <tr> <td colspan="2" style="text-align: center;">Authorised Officer</td> </tr> </table>	<b>Card No.</b>	<input type="text"/>	<b>EMP No.</b>	<b>Initials</b>	Customer data entered by _____	_____	Card data entered by _____	_____	Card data verified by _____	_____	Authorised Officer	
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