

**(PLEASE FILL IN BLOCK CAPITALS)**

Title: Rev. ☐ Mr. ☐ Mrs. ☐ Miss ☐ Dr. ☐ Other ☐ Please specify: \_\_\_\_\_

Name on Card

Mothers Maiden Name

Card Number

NIC/Passport

Online Banking User Name

Phone Banking User Name

**Linking Accounts**
☐ Please **ADD** the following

Primary Account

Secondary Savings account

Secondary Savings account (2)

Secondary Current account

Secondary Current account (2)

☐ Please **REMOVE** the following

Account (1)

Account (2)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**For Branch Use Only**

Request received on \_\_\_\_\_ Time: \_\_\_\_\_

CID  Operating Instructions: Sole ☐ Either to operate ☐

Signature Verified by \_\_\_\_\_ Initial \_\_\_\_\_

Customer Data verified by \_\_\_\_\_ Initial \_\_\_\_\_

**For CPU Use Only**

Online Banking ☐ Iflex ☐ Phone Banking ☐

Data Input by \_\_\_\_\_ Signature \_\_\_\_\_ Date

Approved by \_\_\_\_\_ Signature \_\_\_\_\_ Date

**For Card Use Only**

Prepaid ☐ Debit Card ☐

Data Input by \_\_\_\_\_ Signature \_\_\_\_\_ Date

Approved by \_\_\_\_\_ Signature \_\_\_\_\_ Date