CARD'S SERVICE REQUEST FORM

Premier Bank QUICK ACCOUNT | Premier Bank service first

Cardholder's Name : _____

Card Number : ✱ ✱ ✱ ✱ ✱ ✱

Bank Account Number :

Update Information	Phone Number Change	Mobile:
		Residence:
	E-mail Address Change	
	Address Change	Office:
		Residential:

Card Replacement	Replacement Reason: ☐ Lost Card ☐ Damage/Broken ☐ Chip Problem ☐ Other _____ ☐ Point of Delivery ☐ Mailing Address ☐ Branch Name _____ ☐ Embossing Name Change (new) _____
Limit Convert	
Credit Shield	☐ De-enrolment ☐ Re-enrolment
Auto Debit Instruction	☐ Minimum Auto Debit Instruction ☐ Full Auto Debit Instruction Bank Account Number _____ Branch _____
Removal of Lien	Lien Account Number _____
E-statement	☐ Enrolment
Early Renewal	Reason _____
Re-activation	☐ Documents attached _____
Credit Limit	☐ Enhancement Amount: _____ Enclosed Document ☐ Bank Statement ☐ NID/Passport ☐ TIN/Tax Returns ☐ Others
Signature Change	Previous Signature New Signature
Card Closer	Reason:
Others	Please Specify:

CUSTOMER DECLARATION

I declare that the information provided in this request form is true. By signing I agree to the relevant Terms & Conditions of The Premier Bank PLC. of the item mentioned above.

Customer Signature **Mobile Number:** **Date:**

Mailing Address: The Premier Bank PLC.
Head Office: Iqbal Centre, 42, Kemal Ataturk Avenue, Banani,Dhaka-1213.
E-mail: cards@thepremierbankplc.com

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Bank Use only

Received & Signature verified by (Sign & Stamp)