



SUPPLEMENTARY CARD APPLICATION FORM

PRIMARY CARDHOLDER'S DETAILS

Primary Cardholder's Name

Primary Card Number:

SUPPLEMENTARY CARDHOLDER'S DETAILS

Mr./Mrs./Ms./Others:

Date of Birth : DD MM YY YY Gender: Male Female

Mobile Number: Occupation:

Email:

Name to be appeared on card:

Would you like to set up a spending limit for your Supplementary Card?

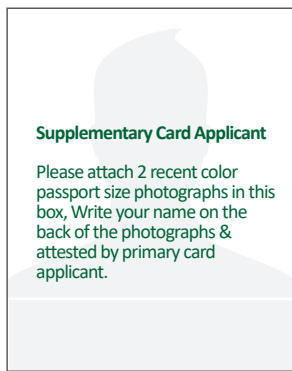
If yes, amount: BDT or % of Credit Limit

Please enclose any of the following document(s):

National ID Passport Number:

Relationship with Primary Cardholder

PRIMARY & SUPPLEMENTARY APPLICANT'S PHOTO AND SIGN



Supplementary Card Applicant's Signature

Primary Card Applicant's Signature

PRIMARY CARDHOLDER'S DECLARATION

I hereby acknowledge the request made for Supplementary Credit Card and warrant that the above information is correct and hereby request and authorize that an Account be opened and Card(s) be issued as indicated herein and renewed and replaced until I give notice to cease, and in connection herewith authorize the exchange and transfer of credit information from / with my Bank or any other source. I understand that Pubali Bank PLC. reserves the right to accept or decline the application without giving any reason whatsoever. The additional applicant's and I agree to be bound by the terms and conditions of The Credit Card Agreement earlier executed by me. I declare and undertake that the Cards issued to me, if used overseas shall be utilized strictly in accordance with the relevant exchange control regulations issued and as amended by the Bangladesh Bank from time to time. In the event I/my supplementary cardholder exceed my/our entitlements as per the exchange control guidelines, I undertake to bring the same immediately to the notice of Pubali Bank PLC, in writing. And in the event of any failure to comply with the prevailing exchange control guidelines issued by Bangladesh Bank, I shall be liable for action under the Foreign Exchange Regulations Act 1947 as amended, and be debarred from the Card facility. The undersigned will be liable for all charges incurred with the Supplementary Card(s) issued on the Account and each Supplementary Applicant will be liable for all charges incurred with the Supplementary jointly and severally with the holder of the Primary Card.

Primary Card Applicant's Signature

Date DD MM YY YY

(By signing here, we certify that we have read and agreed to all applicable Terms & Conditions)