

CREDIT CARD

Application Form

YOUR REQUEST

 New Card

(Applicant must be at least 18 years of age)

Card Type

 American Express Green

 American Express Gold

 American Express Platinum

 Visa Classic

 Visa Gold

 Visa Platinum

 Visa Signature

 Mastercard Standard

 Mastercard Gold

 Mastercard Platinum

 Mastercard World

 Replacement

 Lost/ Stolen

 Expired

 Damaged

 Fraud Capture

 PIN Only

Please fill form in **CAPITAL LETTERS**

If you are not eligible for the product selected, the bank may issue the highest product eligible.

YOUR DETAILS

 Mr

 Ms

 Dr

 Others

Full Name
(as in ID Card/ Passport)

Name to be embossed

Your name as you want it to appear on the Card (Maximum 19 characters including spaces)

Date of Birth

Nationality

ID Card No.
(Passport Number for foreigners)

Passphrase

(Write your own 4-8 character word which will be used for identification purposes)

Note: The relative mentioned below should not be living with you and he/she may be contacted by the bank during verification process

YOUR RELATIVE'S DETAILS

Full Name

Relationship

Permanent Address

House / Building Name

Street Name

Flat No. / Floor

Atoll, Island

Contact Number

SIGNATURE:

YOUR SPOUSE DETAILS

Full Name

ID Card No. / Passport No.

Mobile Number

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Employer's Name

Total Monthly Income
(in MVR)

EMPLOYER DETAILS

Employment Status

Salaried

Self-employed

Retired

Employer / Business Name

Phone Number

Occupation

Length of Service

Years

Months

Name of the previous employer
(If you have been in your current
job for less than six months)

Phone Number

Nature of the Business

Length of Service

Years

Months

For self-employed applicants only

Capital Invested

Annual Turnover
(in MVR)

Number of years company has been in business

Years

Months

Number of Employees in Company

Nature of the Business

YOUR FINANCIAL DETAILS

Monthly Basic Salary
(in MVR)

Fixed Allowance
(in MVR)

Other Income
(in MVR)

Sources of Other Income

Monthly Living Expenses
(in MVR)

Details of loans from any financial institution

Bank Name	Loan Type	Monthly Repayment	Balance

SIGNATURE:

