بنك بانوريـنت فرنسا
BANQUE BANORIENT FRANCE



Debit MasterCard Application

(This Debit Card Application Form will be processed only if the Applicant has signed the Bank's Account Opening Form)

Your Personal Information	☐ MasterCard Premium		☐ MasterCard Classic

Principal Card Holder	Additional Cardholder
Title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms.	Title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms.
First Name:	First Name:
Last Name:	Last Name:
Middle Name:	Middle Name:
Mother's Maiden Name:	Mother's Maiden Name:
Place & Date of Birth:	Place & Date of Birth:
Nationality:	Nationality:
Passport No:	Passport No:
Date of Issue:	Date of Issue:
Expiry Date:	Expiry Date:
Number of years in the UAE:	Number of years in the UAE:
Marital status:	Marital status:
☐ Married ☐ Widow ☐ Divorced ☐ Single	☐ Married ☐ Widow ☐ Divorced ☐ Single
Are you:	Are You:
☐ Employed ☐ Self employed ☐ Others	☐ Employed ☐ Self employed ☐ Others
Company Name & full Address:	Company Name & full Address:
Number of years with current company:	Number of years with current company:
Job Title:	Job Title:
Monthly Income:	Monthly Income:
If self employed, full address of your company:	If self employed, full address of your company:
Your Home Address:	Your Home Address:
Your Contact Details:	Your Contact Details:
☐ Mobile: ☐ Home: ☐ Office: ☐ Fax: ☐ Email:	☐ Mobile: ☐ Home: ☐ Office: ☐ Fax: ☐ Email:
Your Mailing Address for Advices & Statements:	Your Mailing Address for Advices & Statements:
Name as it should appear on the Card:	Name as it should appear on the Card:

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Payment Instructions:
I hereby authorize you to debit directly my Account No (in full) With the amount of any transaction made by me or by the additional cardholder
Declaration:
I, hereby apply for the issuance of BANQUE BANORIENT FRANCE (the Bank) debit card and I/we declare that the information provided in this application is/are true and correct and authorize the Bank to verify any information from any sources it may deem appropriate and I/we also agree that the Bank is entitled in its complete discretion to accept or to reject this application without assigning any reason whatsoever. I/we acknowledge that the use of the Principal and or Supplementary card(s), if any, issued on my account will be deemed an acceptance of the Terms & Conditions of the Banks Card Agreement which accompanies the Card(s) and agree to pay the current annual fees.

Fees and Charges

- Issuance Debit Card: Free
- Replacement of Card: AED 50.00
- Pin Reissue: AED 25.00
- Charge Back Process per case: AED 100.00
- Transaction Copy: AED 35.00

Usage on BANQUE BANORIENT FRANCE ATM's:

- Cash withdrawal/Deposit: Free
- Balance Inquiry: Free

Usage on Other ATM's:

- On NI Switch: AED 2.00
- Other UAE Switch: AED 2.30* *as applicable*
- Balance Inquiry: AED 1.00

Un-Retrieved Cards:

If the principal Debit Card or the supplementary one is not retrieved by me within a period of two months, I hereby authorize you to shred the respective card/s and to debit my account with your charges of AED 200.00 per Card.

Other Charges

Transactions outside the UAE will be subject to the T&C of the Country where the transaction took place. Foreign Currency transactions that are made abroad will be converted at the market rate and will attract a processing fee of 2.00 %

Signature of Principal Cardholder	Signature of additional Cardholder
Date: / /	Date: / /

For Bank Use Only

I confirm that the black list has been checked, that the form has been completed and signed by the customer and by the by Supplementary cardholder in my presence.

Name: Date: / / Signature: