



**Al Baraka UnionPay Debit Card:
Application Request Form**

 New Card

 Replacement Card

Branch: _____

Date: _____

Customer Information:

Full Name: _____

CNIC Number: _____

Card Information:

Name on Card: (maximum of 19 Characters, including spaces)

Account Information:

Accounts to be linked with Debit Card:

Primary

Default

Current Accounts:

Account Number: _____

Account Number: _____

Account Number: _____

Account Number: _____

Savings Accounts:

Account Number: _____

Account Number: _____

Account Number: _____

Account Number: _____

Mobile Number:

(for SMS Banking)

please leave this blank, in case the number is unchanged

Important Note:

- 1 Please note that for one CNIC, only One Debit Card will be issued
- 2 Multiple Accounts having the same CNIC number as the card holder can be linked (provided if the operating instructions are singly or either/survivor)
- 3 4 Current and 4 Savings Account can be linked with a Single Card, whereas One Current & One Savings Account will be treated as Primary for that type
- 4 Only One Account can be set as Default for POS Transactions
- 5 The Mobile Number provided will be updated in the system for SMS Banking services

UNDERTAKING / AUTHORIZATION

- * I / We apply for an ATM/Debit Card facility from Al Baraka Bank (Pakistan) Limited and agree to abide by all the applicable terms and conditions as stated overleaf (which have been read and understood) and as amended / determined by Al Baraka Bank (Pakistan) Limited from time to time
- * I / We confirm that information submitted above is true and complete to the best of my/our knowledge and understanding.
- * I / We authorize the Bank to debit / charge my/our account with any amount withdrawn by me/us from its designated ATM Machines along with any changes applicable therein.
- * I / We apply for a replacement card due to loss/theft/damage/ and hold the bank harmless for any misuse of the Lost/Stolen/Damaged ATM/Debit Card

Name: _____

Applicant's Signature

For Bank Use, Only

Signature Verified: _____

Authorized for Issuance

Gold

Classic

Name: _____

Name: _____

Authorized Signature

Authorized Signature
