

**CHANGE OF CARD/ACCOUNT DETAILS**



Date:

Service Centre/Branch: \_\_\_\_\_

Name: \_\_\_\_\_

Card Number:

A/c Number (If Applicable): \_\_\_\_\_

*Kindly change my details as follows (Please fill what is applicable)*

**Personal Details**

Postal Address: \_\_\_\_\_ Postal Code and Name: \_\_\_\_\_

City/Town: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Mobile: \_\_\_\_\_

Residential Details (Estate): \_\_\_\_\_ Physical Location: \_\_\_\_\_

**Employment Details**

Name of Employer: \_\_\_\_\_ Physical Location: \_\_\_\_\_

Postal Address: \_\_\_\_\_ Postal Code & Name: \_\_\_\_\_

Telephone (Office): \_\_\_\_\_ Fax: \_\_\_\_\_

City/Town: \_\_\_\_\_ Office Email address: \_\_\_\_\_

**Bank Details (FOR CREDIT CARD ONLY)**

Bank & Branch Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Auto Debit:  Yes  No Rate (Min 20%): \_\_\_\_\_

Collection Point (Service Centre/Branch): \_\_\_\_\_

Change of Payment dates: (Tick as appropriate):  2<sup>nd</sup> – 4<sup>th</sup> Monthly  15<sup>th</sup> – 17<sup>th</sup> Monthly

**Authorized Signature(s):** \_\_\_\_\_

**For Bank Use Only**

	VERIFIED BY:	AUTHORIZED BY:
Name:	.....	.....
Signature:	.....	.....
Date:	.....	.....

**Ref No:**