



CARD REQUISITION FORM

(Please use BLOCK letters to fill this form)

Branch: Date:

Card Holder's Name:

Address:

Requisition: Preferred Branch for Card Collection:

Name as it should appear on the card:

Account Number	NGN	USD	GBP	EUR	Embossed	or Insta-Pack	For Insta - Pack (Write correctly the card number issued)															
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								X	X	X	X	X	X		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								X	X	X	X	X	X		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								X	X	X	X	X	X		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								X	X	X	X	X	X		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								X	X	X	X	X	X		

1 Select Card Type (Please tick as appropriate) Embossed cards only

Naira Visa Gold Card	<input type="checkbox"/>	CARD BIN (Branch use only)
Foreign Currency Visa Gold	<input type="checkbox"/>	CARD BIN (Branch use only)
Foreign Currency Visa Platinum	<input type="checkbox"/>	CARD BIN (Branch use only)
Foreign Currency Visa Infinite	<input type="checkbox"/>	CARD BIN (Branch use only)
Foreign Currency Visa Business	<input type="checkbox"/>	CARD BIN (Branch use only)
Naira Visa Infinite Card	<input type="checkbox"/>	CARD BIN (Branch use only)
Type Other Card Type	<input type="checkbox"/>	CARD BIN (Branch use only)

2 Specify Card Limit

NGN	USD	GBP	EUR	Daily ATM Withdrawal Limit	Daily POS Limit
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

3 Reason for Requisition (Please tick as appropriate)

New Card Expired Card Lost

Faulty/Damaged Card Other _____

4 Account Segment (Please tick as appropriate)

Priority Premium Personal

Business Tier 2 Tier 3

(Please note: Debit card for Tier 2 accounts are not enabled for international use)

By signing this form, I consent to have read and understood the Terms and Conditions and other supporting documents relevant to this/these product(s).

Main Account/Card holder Signature Joint Account Signature Additional Cardholder Signature

5 For Internal Use Only

Approver's Signature/PSID:

Date:

(Please tick as appropriate)

New to Bank Existing to Bank