

Static Data Change Request Form

Instruction delivery mode

Customer Came In Person

Delivered by Third Party / Bearer

In case of Bearer, Affix necessary stamp

Date: _____

The Manager,
Standard Chartered Bank (Pakistan) Ltd.
Branch Name: _____

Dear Sir/Madam,

Sub: Request for change of Account/ Saadiq Credit Card details.

Account/Card Title	
Account/Card Number	

Reference to my/our above mentioned details, I/We hereby request you to Change / Update the information type selected (v) as per details mentioned in the "New signature/Details to be updated" section below.

<input type="checkbox"/>	Residence address	<input type="checkbox"/>	Residence Telephone # (Landline)
<input type="checkbox"/>	Office Address	<input type="checkbox"/>	Office Telephone # (Landline)
<input type="checkbox"/>	Change of Signature¹	<input type="checkbox"/>	Mobile Number
<input type="checkbox"/>	E-mail Address	<input type="checkbox"/>	Fax Number
<input type="checkbox"/>	Change of Name / Title of Account²	<input type="checkbox"/>	Addition / Deletion of Mandate¹
<input type="checkbox"/>	Mailing Address		
	All Accounts with the bank (single/joint)		
	Specific Accounts/Cards* : _____ (Account/Card Statements) _____		
	*Address for specific account can only be changed for Accounts Statements. All other communication will be sent to the Mailing Address.		

¹ For Change of Signatures and/or Addition of Mandate, Specimen Signature Card &/or Mandate Form must also be provided to the bank with this request

² For Change of Name / Title of Account necessary documents confirming the change should be submitted with this application.

In case if address is changed to any foreign address, account will be marked Non Resident Account (NRA) and Debit Card will be de-activated.

Existing Signature as per bank record (only required for signature change)	New signature/Details to be updated	
	Primary Applicant Signature	Joint Applicant Signature

If instructions are delivered to the bank by a Third Party / Bearer on my / our behalf, the Bank will reconfirm the instructions from me/us via telephone (as per contact details in bank records) before executing / processing the same. If the Bank is unable to contact or the details are not reconfirmed by me/us the Bank will not execute / process these instructions.

By signing below, I / We authorize the bank to execute these instructions.

Primary Applicant Signature	Joint Applicant Signature	BOM / BM signature & stamp (Applicant Signature Verified)

Branch acknowledgement for receipt of instructions

Instruction Serial #: _____

Date & Time of receiving instructions: _____

Branch Name & Code: _____

Received by: _____

Branch Stamp: _____