## Services Request Form 1 (USE BLOCK LETTERS & CROSS OUT UNUSED SECTIONS) Please Fill in the Required Section(s) Only



Date D D M M Y Y	YY		Braı	nch/	Center Na	ame						
Account Number					-							
Account Name			1	1			I					
Declaration		Sign	nature:	1st	Applica	ant		Signa	ture:	2nd A	nnlica	nt
I have understood, authorized & advised	the	Olgi	iuturoi	100	тррпо	4116		Olgilo	itai o.	LIIGA	ррпоа	
bank to comply the below instruction												
A. Update Information: Please	update my	/ our	followi	ing i	informa	tion fo	r:					
Residence Address												
Permanent Address												
Office Address												
Mailing Address (Please select One)	Resi	dence	Addres	SS		Permar	ent Ado	dress		Off	ice Ad	dress
Mobile Number (Primary)					Mobile Number (Secondary)							
Phone Number Home					Phone Number Office							
Email Address												
<ol> <li>The above Information shall apply</li> <li>The above primary mobile and Em.</li> <li>Duly signed signature card &amp; latest</li> </ol>	ail address sha	all be us	sed for al	I type	es of Digit	al Servic	es, i.e., S	MS Alert,	Online		ı, e-Stat	ement.
Occupations Details (Document A	ttached)							Mon	thly Ir	ncome		/-
Designation & Organization									(In BD	T)		
Business Details:	Organization											
	Business T			Mar	nufacture	r	Servic	e L	T	rading		
	Type of Pro									•••••		
	Manpower	Yearly Turn over:										
ETINI Niversia a	Manpower	· 			· · · · · · · · · · · · · · · · · · ·		·····			T	T	<del></del>
ETIN Number				1	1 1					1	<u> </u>	
NID Number												
Passport Number Birth Certificate Number				1	1 1							
Trade License Number												
Personal Details	Personal details shall match with applicant's Identity Documents. Supporting documents attached. If it								ed. If it			
r ersonal Details	differs then update the information based on my declaration & undertaking.											
Spouse Name												
Father's Name												
Mother's Name												
Date of Birth					Natio							
Religion						al Statu						
B. Digital Services: Please er												
Online Banking			g Enrol				E-State	ment Er			1	
Frequency of E-Statemen			Monthly			uarterly			Yearl	y	Year	ly
E-Statement D-Enrolment		<u> </u>	Start ser		ng hard (			•	• /			
For Bank Use Only					Instructi			rough E	Bearer	(Call B	ack De	tails)
Verified Officer					Telephone							
CSO Sign					Date & Tir					000		
Name Seal				L	MDB Phor					+880	or Only	
Authorizing Officer					Name of C					A/C Hold	ei Only	
CSM / BM Sign Name Seal					Result of (			Pool:		Positive		
				_	Name of C		king Call	Dack	-+			
Branch Head Approval					Sign with	beal						