

Application Authorized by



Debit Card Application Form Personal Banking Accountholders

NOTE: Please fill-in this form	his form in "BLOCK" letters and sign at all required places.			* Indicates mandatory field	
Date*	Y Y Y Y	ch* Code	Name	9	
Account Details					
Account Name*					
Account Number*					
Debit Card Request Details					
Type of request* (Select only one)	New Card	Replacement Card (Please ensure to block the old car		enewal	
discretion to accept or reject Card(s) will be subject to the available on www.hbl.com/ua comply with and be bound by Bank in force from time to tim Bank's Schedule of Charges, fr	e "Bank") to fulfil the request a an application without assign HBL General Terms and Conc ae (which may be amended fro y the same as amended, supple	ning any reason whatsoever. I/ditions and Debit Card Terms a om time to time at HBL's sole di emented and/or modified from k to debit the fee and charges o	We acknowledge tha nd Conditions accom scretion). I/We hereb time to time by the B	It HBL is entitled in its absolute the use of my/our HBL Debit apanying the HBL Debit Card(s) y agree and confirm to observe, ank and with the policies of the lest and Usage, as defined in the	
Accountholder Name(s)*					
Signature(s)*					
Disclosure					
Bank. The application processing time registered address may vary.	Name	For Bank Use only Signature	Date	تسليم بطاقة الخصم على عنوانك المسجل.	
Signature Varified by	T Valite	o.g.racaro			
Signature Verified by Application Reviewed by					
Accountholder Category	Resident Non-Reside	Account halder Type	Chacked and va		
				rified single signatory	
Accountholder Information (Please verify and select one)	Accountholder Informati	ion is up-to-date (Mobile Numl	per, Email Address, ID	•	
Accountholder Information (Please verify and select one)	Accountholder Informati		per, Email Address, ID	, Mother's Maiden name etc.) ed for processing	
Accountholder Information	Accountholder Informati Accountholder Informati	ion is up-to-date (Mobile Numbion Update Form is obtained se	per, Email Address, ID parately and submitte [, Mother's Maiden name etc.)	
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Accountholder Information (Please verify and select one)	Accountholder Informati Accountholder Informati Classic Please verify and select one of the belo The accountholder has a monthly Salary/Income of up to AED 14,999 which is transferred / will be transferred to the given HBL Account. Salary Transfer Letter should be provided OR at least 1 Month of Salary Credited to the	ion is up-to-date (Mobile Numbion Update Form is obtained segment of Gold We Please verify and select on Salary/Income of up to 39,999 which is transbet ransferred to the Account. Salary Transshould be provided Omonth of Salary Cred	per, Email Address, ID parately and submitte e of the below as a monthly o AED ferred / will given HBL fer Letter R at least 1	Platinum Please verify and select one of the below The accountholder has a monthly Salary/Income of more than AED 40,000 which is transferred / will be transferred to the given HBL Account. Salary Transfer Letter should be provided OR at least 1 Month of Salary Credited to the	
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