

# HBL

Account No.

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Date 

D	D	M	M	Y	Y	Y	Y
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Branch \_\_\_\_\_

Title of Account \_\_\_\_\_

Operational Instructions  Single  Jointly  Either or Survivor  
 Others (Please specify) \_\_\_\_\_

**Name**

**Specimen Signatures** (Please use black ink)

	1.
	2.

\_\_\_\_\_  
Bank Authorised Signature(s)

Date 

D	D	M	M	Y	Y	Y	Y
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