Customer Requisition/Form D

Standard Chartered

From

Name: _____

Address: _____

_____

Tel: _____

Mobile: _____

Dear Sir/Madam:

Re: Cardholder's Name: _____

Credit Card No.: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry: _____

I would like to request for the following :

☐ Increase in credit limit (please attach latest income documents as applicable) _____

☐ SCB Bank A/C No. (if any) _____

☐ Upgrade/downgrade (please specify) _____

☐ Early renewal required (please specify the reason) _____

☐ Removal of lien (please insert your Lien A/C No.) _____

☐ Cancellation of Standing Instruction (please insert your SI A/C No.) _____

☐ Others (please specify) _____

☐ **SMS Banking*** ***(This is a mandatory requirement)***: SMS Banking PIN ☐☐☐☐ (Please provide 4-digit PIN to avail SMS Banking.)

☐ **e-Statements**: E-mail Address (for e-Statements, you can give uptothree e-mail address):

1. _____
2. _____
3. _____

Thank you.
Sincerely,

_____

Cardholder's Signature Date D D M M Y Y

For Bank Use Only

Input by : _____ Date : _____

Verified by : _____ Date : _____

*Condition apply.