Maldives Islamic Bank

f'isacard UPDATE FORM

REQUEST TYPE

Please select the type of update required

- ☐ Personal Details
- ☐ Account Details
- ☐ Withdrawal Limit

PERSONAL DETAILS (FILL IN BLOCK LETTERS)

Full Name *(Mr. | Ms. | Dr. | Others)*

ID Card / Passport No. (*Please attach a copy*)

Card Number

Existing F'isa Card holders need not fill the below section unless there are changes in the information provided earlier.

Security Phrase *(4 to 18 characters)*

Current Address

House / Building Name	
Flat No.	Floor
Street Name	
District	Postal Code
City / Island	Atoll

Mobile

Home/Office

Email Address

YOUR DESIGNATED ACCOUNTS TO BE LINKED/UNLINKED

Default Account

9 9 0 1

Additional Accounts to be linked

9 9 0 1

9 9 0 1

9 9 0 1

Accounts to be unlinked

9 9 0 1

9 9 0 1

9 9 0 1

DAILY ATM WITHDRAWAL LIMITS - PLEASE SELECT

- ○ MVR 2,500
- ○ MVR 5,000
- ○ MVR 10,000
- ○ MVR 15,000
- ○ MVR 20,000

(A maximum of MVR 5,000 applies per single ATM withdrawal)

NOTIFICATIONS

Please select your preferred method in order to receive service notification
(at least one box needs to be checked)

- ☐ SMS
- ☐ Email
- ☐ Both

DECLARATION

I/We, the undersigned, hereby make this unilateral declaration to Maldives Islamic Bank Pvt. Ltd. (the 'Bank'), that;

a) I/We have read and understood the Terms and Conditions stated in this application and agree to be bound by them. I/We accept that the usage of the F'isaCard will also be construed by the Bank as my/our acceptance of the Terms and Conditions applicable to the F'isaCard .

b) By signing below, I/We hereby request the Bank to issue F'isaCard in my/our favour, and to link the accounts as indicated in this form.

c) I/We confirm that I/we have the required mandate to operate the account(s) linked to my/our F'isaCard (s) issued by the Bank.

d) I/We hereby confirm and warrant that the information provided in this application is true, accurate and correct.

e) Not withstanding to any of the terms and conditions, it is in the sole discretion of the bank to accept the requested changes.

APPLICANT'S SIGNATURE

Date

Additional Signatures (for joint accounts)

Date

BANK USE ONLY

	S.ID	*Initials*
Application received and verified by		
Signatures verified by		
Application updated to system		
Application Approved by		
Customer Number		