



Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	(DD/MM/YY)	Branch Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Branch Name	<input type="text"/>								

**Customer Information**

Account Title	<input type="text"/>										
Account Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Customer Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(As appearing on Soneri VISA Debit Card)
Customer CNIC/SNIC/NICOP/POC #	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Passport #	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(Only for resident foreign nationals)

**Customer Requested Changes**

The Manager,  
Soneri Bank Ltd.

Dear Sir / Madam,

I ..... Bearing SBL VISA Debit Card  would like to change / update the following information.

Contact Number (Res.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contact Number (Off.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cell Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fax Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Change/Update of Address	<input type="text"/>								
	<input type="text"/>								
City	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E-mail ID	<input type="text"/>								

**Account Linking Instructions:** Other Account Numbers within Soneri Bank (bearing the same title of account and linked with the same CRM) to be linked with SBL Visa Debit Card

Branch Code	Account #	Branch Code	Account #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Signature of Soneri Visa Debit Card Holder

**For Bank/Branch Use Only**

Branch Name & Code: \_\_\_\_\_ CRM #

Checked by \_\_\_\_\_ Authorized by \_\_\_\_\_

Branch Officer Branch Manager/Operations Manager

**Note for Branch:** Ensure to take a legible copy of applicant's valid CNIC/SNIC/NICOP/POC/Passport. Original CNIC/SNIC/NICOP/POC/Passport is to be seen by the Branch Official and endorse the obtained copy respectively by signing and affixing "Original Seen" Stamp. Verify the above information with applicant's CRM and affix "Signature Verification" stamp for applicant's signature on this form. In case of non-compliance the application may / can be rendered as discrepant.

### **Rules for Amendments for the Applicant**

1. In order to ensure the customer security and confidentiality the applicant is advised to authenticate the document by affixing the same signature as visible on his/her CNIC/SNIC/NICOP/POC or provided during the account Opening process.
2. The Applicant must bring his/her Original CNIC/SNIC/NICOP/POC/Passport along and will ensure to submit a legible copy of the same.
3. If the applicant wishes to amend his/her CNIC/SNIC/NICOP/POC/Passport number, Date of Birth or Mother's Maiden name, then he/she must apply for Soneri Visa Debit Card replacement where the SBL Visa Debit Card replacement charges will be levied as per the Bank's Schedule of Charges, as revised from time to time.