

Account Services Form-II Please Fill in the Required Section(s) Only

(USE BLOCK LETTERS & CROSS OUT												
Date D D M M	YYYY		Branc	h Name								
Account Number												
Account Name												
Declaration Signature: 1st Applicant Signature: 2nd Applicant Signature: 3rd Applicant												
I have understood, authorized & advised the bank to comply with the below instruction												
A. Statement of Account / Bank Certificate with or without balance												
From				То						T	T	
Provide Statement / certificate	to the bearer named	as Mr. /	Ms						I			
Bearer's Specimen Signature Applicants' Attestation:												
B. Stop Payment Request / Stop Payment withdrawal request												
Cheque From				eque To						\top	T	
Date	Tin	ne		AM	PM	C	heque A	mount			BDT	
Reason For Stop Payment	Lost Misplac	ced 🔲	Perso	nal Reaso	n 🔲	Dispute	;					
C. Update Information: Please update my / our following information for:												
o. opaate information. I							tlement thr	ough suc	cession	certifics		
	 ■ No Nominee *Reason(Settlement through succession certificate) ■ Assign New Nominee in case of No Nominee 											
Nominee	Replacement of old Nominee											
Nominee Name:												
	No of Nominee : Nominee Share (%)											
Existing TP Review TP revised after 6 months of account opening Frequent breach transaction threshold level												
Review after 5 years for Low risk account												
Review after 1 year for High Risk account												
	Review for accor											
				90)	
Account Signature												
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(
Photo Change	Photo											
] [
1. For Nominee change, duly								o ID are r	equired			
2. For Transactional profile Ch							uired					
 For signature and photo ch D. Dormant Account Accoun		ard & lates	st paspo	ort pnoto are	e require	ea.						
Reason for Non-Operation		`ountry	Λda	Iress Cha	ngod E	Dorce	anal Paa	con 🗆	Focus	Shifto	d	
'												
				Time of PresenceAM / PM								
Activation Requirements		formation Page duly signed										
	KYC with r						NID (WIE	DI				
For Bank Use Only			,	Instructio	ns Red	ceived t			Call Ba	ck Det	ails)	
Verified Officer				Telephone							,	
Officer Sign	†			Date & Tir								
Name Seal With Date	1			Phone Nu				+8	80			
Authorizing Officer	1			Name of C			<u> </u>		C Holde	r Onlv		
MOP/HOB Sign	†			Result of 0					sitive			
Name Seal With Date			=	Name of C			ıll Back	+ -				
Branch Head Approval				Sign with		g 00	2451	\dashv				
	†			2.3 4161								
HOB With Date			- 1	1				ı				