

KUMARI VIRTUAL CREDIT CARD APPLICATION FORM

Branch:

Signature

FONEPAY To apply for the Virtual Credit Card, please complete and return this application form along with necessary documents. To be filled in BLOCK LETTERS in black ink.														
PERSONAL DETAILS OF APPLICANT														
Name:														
Account Number: PHOTO														
Mobile Number:														
Nationality:														
Citizenship Number: Date of Issue: Place of Issue:														
NID Number: Date of Issue:														
Email Address: Phone Number:														
No. of Dependents:														
Permanent Address:														
House No.: Ward No.: Ward No.:														
RMC/MC/SMPC/MPC: District: Province:														
Mailing Address:														
House No.:														
RMC/MC/SMPC/MPC: District: Province:														
OCCUPATIONAL DETAILS														
Employment Status: Salaried Self Employed Contractual Employment Others														
Name of Organization / Your Business:														
Address of the Organization:														
Designation: Years of Employment:														
Type/Nature of Organization:														
Government Private Public NGO Diplomatic Mission Others														
Permanent Account Number (PAN):														
Type/Form of Business:														
Proprietorship Partnership Private Limited Ownership Percentage in business:														
Registration Number of the Firm:														
PAN/VAT Number of the business unit:														

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Age																				
	ential Status																			
Month	nly Gross Income																			
Banki	ng with Kumari Bank Lir	mited (in	Years)																	
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S.N.															Y	es	N	No 1		/ A
1	Recent passport size photograph (1 Copy)																			
2	E SEA CONTRACTOR PROGRAMME																			
3	10																			
4																				
5	7																			
6																				
7	7 PAN/VAT Certificate																			
					RE	FERE	NCE													
Referen	nce refers to any existing	custome	rs or sta	ffs o	f Kı	ımari 🏻	Bank	Lin	ited.											
Refere	nces Full Name:												\top	\top	Τ					
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Email:																				
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liability form. I of Kum from ti hereby	y agree that Kumari Ban y whatsoever. I authorize declare that I have read, nari Virtual Credit Card S me to time or any condit declare that the informat otherwise, I agree to bea	Kumari E understo Services cion stipul tion giver	Bank or in od, accept the Bated by above	ept, a ank t the I in th	ents and v hat Regu	to ma will alware in alatory	ke an ways force	y en abid incl	quiri e by udin es ar	es reg all the g ame nd I aş	ardii Ter ndm gree	ng r rms ent to a	ny i & (the abid	nfor Cond reto e by	mati dition unil	ion i ns g ater m u	n the over ally l	app ning by the	olica the he E	tion use Bank ly. 1
	er declare that I have been ccept fees and charges le				and	charg	es, b	enefi	ts, a	nd usa	ige o	of K	lum	ari E	Bank	Vir	tual	Cre	dit C	Card
Sign Date:	nature of Applicant	Please	sign ins	ide t	he b	oox.														
Date.		Y																		

(Please verify your application form before submitting to the Bank. Processing will be delayed if you do not complete all related sections. Incomplete application or application with pending documents will not be processed.)