

RELIANCE BANK LIMITED CORPORATE VISA DEBIT CARD APPLICATION

**An application form is required for each Individual cardholder.
Please complete all sections of this form in BLOCK CAPITALS in black ink**

About the business

Full business name

Full business address

Account number
(existing customer)

Business name to appear on card
(max 24 characters)

Cardholder's name
(max 24 characters)

Security questions for cardholder

Your favourite colour

Your favourite place

Your favourite book

Your mother's maiden name

Your country of birth

Your town of birth

Your date of birth

Cardholder's declaration

I accept and agree to be bound by the Reliance Bank Visa Terms & Conditions for the Reliance Bank Corporate Visa Debit Card, and any subsequent amendments. I accept that my personal data will be passed to Kleinwort Benson (Channel Islands) Limited and EVRY Financial Services UK Ltd, in association with the production of my Reliance Bank Corporate Visa Debit Card and my data will be processed in accordance with your Privacy Policy and Visa Debit Card Terms & Conditions

Cardholder's signature: _____ Date: _____

Mandate authorisation (on behalf of the business)

I / We request a Reliance Bank Corporate Visa Debit Card to be issued to the above applicant, with the following 24 hour rolling limits* of POS £1,000 & ATM £100 and I/we understand that each transaction is liable for a charge, in accordance with our agreed tariff.

Signature: _____	Date: _____
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Signature: _____	Date: _____
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*If a higher limit is required please contact Customer Service on telephone number 020 7398 5400.

FOR BANK USE ONLY

This cardholder account has the following amounts approved

ATM £ _____

POS £ _____

I confirm the total business facility of £ _____ has been approved.

Signature _____

Date: _____

Position _____

Customer Service

Card ordered as per the above ATM & POS limits.

Signature _____

Date: _____

