

No.: \_\_\_\_\_

Employee ID (in case of staff only)



सेन्ट्रल बैंक ऑफ़ इंडिया  
Central Bank of India

1911 से आपके लिए "केंद्रित" "CENTRAL" TO YOU SINCE 1911



Branch No.

CREDIT CARD

## APPLICATION FORM

(All variants)

Date

### CREDIT CARD CHOICE

Please indicate your Central Bank of India Credit Card choice:

DOMESTIC CARD ☒

INTERNATIONAL CARD ☐

☐ Aspire

FD No. \_\_\_\_\_

FD No. \_\_\_\_\_

FD No. \_\_\_\_\_

FD No. \_\_\_\_\_

FD No. \_\_\_\_\_



World



Titanium



IDACard



Reliance Big Cinema



Platinum



Gold

International Use: USD 500 ☐ USD 1000 ☐ USD 1500 ☐ Specify any other \_\_\_\_\_

### PERSONAL DETAILS\*

Name (First Name) (Middle Name)  
L I S A A N N E

(Last Name)  
W I L S O N

Name as desired on the Card  
(Maximum of 20 characters) L I S A W I L S O N

Age 29

Gender ☐ Male ☒ Female

Mothers Maiden Name M I L L E R Date of Birth 05 07 94

Nationality B R I T I S H PAN No.

(This information may be used to verify your identity when you want your card account details over the phone)

Vehicle Owned ☐ Car ☐ Two wheeler ☐ Organization Provided ☒ None Educational Qualification ☐ PG ☒ Graduate ☐ SSC/HSC ☐ Others

Number of Dependents (Excluding Spouse) ☒ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ >4 Married ☐ Yes ☒ No ☐ Others

### RESIDENTIAL ADDRESS\*

5 6 7 B I R C H L A N E , L O N D O N

Landmark City L O N D O N Pin W C 2 N 5

State E N G L A N D Preferred Mailing Address: ☐ Residence ☐ Office

Std Code Tel. No. Mobile No.

Email

Permanent Address same as above ☐ Yes ☐ No

(If no then Please fill in the details below)

Landmark City Pin

State Std Code Tel. No.

## EMPLOYMENT DETAILS\*

Salaried ☒ Self Employed ☐ Retired ☐

Name of the company

Designation

Office Address

Landmark

City

State

Fax No.

Classification ☐ Managerial or Self Employed ☐ Executive ☐ Junior/Clerical ☐ Others ☐

Total Years of Experience <1 ☐ >1 ☐ <3 ☐ <5 ☐ <10 ☐ <15 ☐ Numbers of yrs. in current job <1 ☐ >1 ☐ <3 ☐ <5 ☐ <7 ☐ <10 ☐

Left over Service <1 ☐ >1 ☐ <3 ☐ <5 ☐ <7 ☐ <10 ☐ Gross Annual Income < 1.5 Lac ☐ 1.5-3.5 Lac ☐ 3-5 Lac ☐ 5-10 Lac ☐ >10 Lac ☐

Income from other sources <75,000 ☐ upto 1,50,000 ☐ upto 2,50,000 ☐ above 2,50,000 ☐

% Loan servicing of Gross Income None ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ >20% ☐

Nature/type of Business of Organization ☐ Software/IT ☐ Eng/Infrastructure ☐ Finance/Insurance ☐ Textile/Leather ☐ FMCG/Retail ☐ Others

IT Return ☐ Provided ☐ Not-Provided

Credit Card/s held with other Banks/Institutions

S.No.	Card No	Issued by Bank	Credit Limit
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>

## ID PROOF

1) Passport No.:

2) Voter ID:

3) UID:

4) Driving Licence:

5) Any Other:

## BUSINESS

Business type Corporate ☐ Proprietorship ☐ Partnership ☐ Not Applicable ☐ Length of Business Not applicable ☐ upto 5 years ☐ upto 10 years ☐

> 10 years ☐ Sales Tax Return Provided ☐ Not-Provided ☐

## ALERTS

### Please consider these valuable services

☐ SMS Alerts ☐ Statement by E-mail

(If you opt for statement by E-mail, no physical statement will be sent. However a physical statement will be provided on request through customer care. This is our Banks **Green Initiative** to "Save Paper and Save Trees". Please join us in this initiative)

I understand that under the alert facility, Central Bank of India will enable me, to receive Customer Alert Messages with respect to events/transactions relating to my Credit Card or information that will be useful to me over my Mobile Phone or through e-mail (subject to the information provided in the Application Form). I agree to abide by the terms and conditions.

## MANDATE FORM FOR DEBIT FACILITY

I/We hereby authorise the Bank to debit my/our bank account no.  with Branch  through Auto Debit Clearing for making payment towards credit card dues.

Account Type: ☐ Savings ☐ Current ☐ Cash Credit/OD

Total Amount Due ☐

Minimum Amount Due ☐

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold the user institution responsible. I/We also authorize the bank to debit my account for charges towards mandate verification and transactions bounced due to "Insufficient funds" as applicable. I have read the option invitation letter and agree to discharge the responsibility expected of me as a participant under the scheme.

Certified that the particulars furnished above are correct as per our records.

Signature of the Authorized official from the Bank  Date

Signature of Account Holder