

Date Branch

Customer Reference Details

Account Type ☐ Business ☐ Personal

Account No.

Account Title

BUSINESS/PERSONAL ACCOUNT DETAILS

Title ☐ Mr. ☐ Mrs. ☐ Miss ☐ Other (please specify) Full Name Nationality Country of Residence Mobile Number + International Mobile No. + Email Address

SIGNATORY SECURITY DETAILS

☐ What is your date of birth? ☐ What is your mother's year of birth? ☐ Where is your favorite holiday destination? (kindly state country only) ☐ What is your favorite season? ☐ Spring ☐ Summer ☐ Autumn ☐ Winter☐ How many siblings do you have? ☐ What is your horoscope?☐ Aries ☐ Gemini ☐ Leo ☐ Libra ☐ Sagittarius ☐ Aquarius ☐ Taurus ☐ Cancer ☐ Virgo ☐ Scorpio ☐ Capricorn ☐ Pisces

DECLARATION

» I/We hereby apply for a debit card issued by Habib Bank AG Zurich and confirm that the details provided in this application form are complete, accurate and correct.

» I /We agree: (i) that I/We have received, read, understood and agree to be bound by the Debit Card Terms & Conditions ("T&C") and shall use the debit card in accordance with the T&C. This application form and the T&C shall be read and construed as one document; (ii) that the debit card and PIN will be sent separately to my/our address on record; (iii) that when I call you to activate the debit card and in any future telephone communications that I may be asked to answer one or more of the verification questions stated above; (iv) to the HBZ SMS Service whereby you may send me SMS text alerts to my mobile number stated above when any transaction is conducted using the debit card; (v) to receive One Time Password (OTP) on my email address and mobile number when conducting a transaction on internet whenever a Verified by Visa (VBV) authentication is required.

Authorised Signatory 1

Name Date

Authorised Signatory 2

Name Date

Authorised Signatory 3

Name Date

For Office Use Only

Officer:

Signature Name Date

Relationship/Branch Manager:

Signature Name Date

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