Debit Card application form for existing Instant Access Savings Account

For Officer use
Customer Identifier .....

Please Provide Your Account Number & Sort Code

1. Personal Details

Title: Mr ☐ Mrs ☐ Ms ☐ Other

First Name

Middle Name

Surname

Date of Birth

Passport Number

Date of Issue

Date of Expiry

Country of Issuance of Passport

National Insurance Number

Mother's Maiden Name

Home Telephone Number

Mobile Number

By giving us your mobile number, you have agreed to register for MasterCard Secure Code for using your Debit Card for Internet based online payments

E-mail

(By giving us your e-mail address, you agree we may send you emails to service your account)

Current Address (House / Flat Number / Name)

Postcode

Country

2. Employment Details

Name of Employer

Address

Gross Annual Income

3. Debit Card

Name to be displayed on Debit Card (Not more then 25 characters)

4. Declaration

I, the undersigned, request State Bank of India to issue me with a Debit Card on my SBI Instant Access Savings Account.

I confirm that I have been provided with a copy of the Bank's Terms and Conditions which I have read and I understand these form part of my contract with the Bank. If there is anything in the Bank's Terms and Conditions which I do not understand or wish to discuss I will contact customer services on 08081680304 at the Bank before signing this form.

I understand that the information I have given to the Bank and other information I give to the Bank (described in the section of the Bank's Terms & Conditions relating to Data Protection) will be used for the purposes set out in that section

By submitting this application form I understand and agree that the information I have given may be used to offer other services from the State Bank Group and that I may be contacted for this purpose in the manner set out in the data protection section of the Bank's Terms & Conditions unless I have indicated an objection to this by ticking the box below.

I choose NOT to be contacted by the Bank by electronic means (e-mail or SMS) or in any other way (including by post or telephone) with information about products and services which the Bank considers may be of interest to me by ticking this box. ☐

I agree to provide to the Bank in writing notice of any changes to my personal details or my circumstances which are provided in this form.

A separate form will be required from each individual in a joint account.

Applicant Signature

Date