

Date: DD / MM / YYYY

The Head of Branch

Bank Asia PLC.



_____ Branch/Center/Window

A. Account Information Update/Change:

Please arrange to change/update of the following information of my/our a/c as indicted below:

Account Information		
Particulars	Account Number: _____	Account Title: _____
	Existing	Proposed
<input type="checkbox"/> Mobile number		
<input type="checkbox"/> E-mail Address		
<input type="checkbox"/> Account Title (as per NID)		
Address: <input type="checkbox"/> Present <input type="checkbox"/> Permanent		
<input type="checkbox"/> Change of Signature		
Change of Nominee	Name : NID No. : Date of Birth : Mob. No. :	Name : NID No. : Date of Birth : Mob. No. : Relation :
Others (Please specify)		

B. Re-activation of Dormant Account: You are requested to re-activate the following Dormant account :

Account Information	
Account Number: _____	Account Title: _____

C. Close of Account: I/we would like to request you to close my/our following A/C after deduction of all necessary charges (if any) as per below instruction. I/we have further confirmed that I/We have no liability with your esteemed Bank and all other instructions to the a/c are hereby canceled.

Close Account Details	
Account Information	Account Number: _____ Account Title: _____
Document Attached	<input type="checkbox"/> Unused Check Leaves: From _____ To _____ <input type="checkbox"/> ATM Card <input type="checkbox"/> Others _____
Reasons for Closing the Account	<input type="checkbox"/> Leaving Bangladesh <input type="checkbox"/> Service quality concerns <input type="checkbox"/> Salary A/C <input type="checkbox"/> Charges <input type="checkbox"/> Others _____
Remaining Balance Payment Instruction	Transfer to A/c No. : _____ Account Title: _____ Or <input type="checkbox"/> Issue a Pay Order Fvg: _____

D. Encashment Service Request (s): Please arrange to encash the following(s):-

Account Details	Account Number: _____ Account Title: _____ A/C Type : <input type="checkbox"/> FDR <input type="checkbox"/> DPS <input type="checkbox"/> Others _____
Encashment Type	<input type="checkbox"/> Matured Encashment <input type="checkbox"/> Pre-matured Encashment <input type="checkbox"/> Interest Withdrawal
Payment Option	<input type="checkbox"/> In cash Or <input type="checkbox"/> Credit Account No: _____ Or <input type="checkbox"/> Issue a Pay Order Fvg. _____
Encashment of Sanchaypatra	<input type="checkbox"/> Sanchaypatra Reg. No.: _____ Issue Date: _____ Amount: _____

I/We have authorized the above instructions. I/We hereby declare that all details provided in this form are true and correct and are supported by valid documents enclosed with this form.

Signature of 1st Applicant_____
Signature of 2nd Applicant**For Bank Use Only** All the information stated above and customer's signature has been checked and verified. All relevant supporting documents have been obtained as per bank's policy.

<input type="checkbox"/> Signature Verified	Physical Presence <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Callback Confirmation: Contact No: _____ Date & Time: _____	Charge realized: <input type="checkbox"/> Yes <input type="checkbox"/> No Tk _____
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Initiating Officer's Signatue with Seal_____
Approving Officer's Signature with Seal