

Account Owner(S) Details	Card number Title Given name(s) : : : : : : : : : : : : : : : : : : :
	Surname Date of birth Gender
	Residential address (no PO Box please)
	City/Town Years there Your previous address (if there less than 3 years)
	City/Town Years there Home phone no. Work phone no. Drivers licence no.
	Marital Status Spouse's name)if married)
	Name and address of closest relative not living with you Name
	Address City/Town Relationship (eg father, sister)
	Name and address of your current employer Name
	Address City/Town Years there
	Details of the Primary Cheque account Account number : : : : : : : : : : : : : : : : : : :
	Please issue the Visa Debit card(s) to my/our nominated account : : : : : : : Transaction will be debited from this account
	Branch address card will be delivered to City/Town
	The Bank is hereby authorised to charge to the account(s) nominated above any debits and charges initiated/incurred by me/us by use of the Card issued pursuant to this application in any Electronic Funds Device and approved by the Bank from time and time. I/We acknowledgment that should this application be approved, the Card which issues will be governed by Conditions of Use which will accompany the Card.
	Signature x Date.
Bank Use Only	Bank Use Only – Branch Customer ID Signature verified Bank Stamp All details confirmed Appointed officer Date
	Send the completed form to: PO Box 13092 Suva, Fiji

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