DEBIT CARD APPLICATION FORM

BAIDURI BANK

FLEXCUBE CIF						
Individual CIF No:						

Please bring along original and photocopies of required documents:

- ***Photocopy of valid Brunei IC or ID (Applicant must be at least 15 years old and must hold a Baiduri Savings' or Current Account)***

CHOICE OF CARD & ANNUAL FEES *(Please tick where applicable)*

Card Type	***Fee (s)***
☐ VISA Platinum Debit *Min. monthly income of BND2k – neither salary assignment nor proof of salary required*	*B$18.00*
☐ Royal Brunei VISA Platinum Debit by Baiduri *Min. monthly income of BND2k – neither salary assignment nor proof of salary required*	*B$18.00*
☐ VISA Classic Debit WITH Bonus Points	*B$9.00*
☐ VISA Classic Debit WITHOUT Bonus Points	*Free*
☐ VISA Supasave Debit	*B$9.00 (Free for first 5 Years)*
☐ MASTERCARD Smart Executive Platinum Debit *For Smart Executive Members only (Min. age of 21 and salary assigned / to be assigned)*	*Free*
☐ MASTERCARD Prestige World Debit *For Prestige Members only*	*Free*
☐ UnionPay Card*	*Free / Personalisation B$15.00*

Name to appear on card
(Max 19 Characters only)

Visa Platinum Debit / Royal Brunei Visa Platinum Debit by Baiduri / Visa Classic Debit / Visa Supasave Debit / Mastercard Smart Executive Platinum Debit / Mastercard Prestige World Debit

UnionPay Debit Personalised Card Only *(Personalisation Fee Applies)*

CARD COLLECTION DETAILS *(Please tick one only)*

I would like to collect my Baiduri Card at:

☐ Main Branch ☐ Tutong Branch ☐ Seria Branch ☐ Kuala Belait Branch ☐ Others _____

CUSTOMER PERSONAL INFORMATION *(Please tick where applicable)*

Full Name (as per Identity Document) ☐ Mr. ☐ Mrs. ☐ Dr. ☐ Miss

I/C No: _____ **Colour: (Y / R / G)**

Residential Address:

Postcode: _____

☐ Owned ☐ Rented ☐ Mortgaged ☐ Employer's ☐ Parents'

Passport No: _____

Gender:
☐ Male ☐ Female

Marital Status:
☐ Single ☐ Married ☐ Other _____

Correspondence/Mailing Address:
☐ same as residential address

P.O.Box (_____) ***Postcode***: _____

Date of Birth: _____ /_____ /_____

Nationality: _____

Contact Details:

Home: _____ HP: _____ Office: _____

Email:
(Max 30 characters only)

EMPLOYMENT DETAIL

Name of Employer:

Employer Address:

Postcode: _____

Annual Gross Income:	***Occupation:***	***Date joined:***	***Expiry date of contract (If applicable):***

BANK ACCOUNT TO BE LINKED

Please link my following Baiduri Bank / Baiduri Finance account(s) to my Baiduri Debit Card

Main Account (For Card purchases only)

If you have more than one (1) account with Baiduri Bank, you may request them to be linked to your Card (only for Baiduri ATM withdrawals)

Other Account(s)

CARD SPENDING LIMIT

No monthly spending limit (limited to available funds in respective account); OR

☐ Requested **MONTHLY** spending limit of B$_____

DEBIT CARD INSTANT EMBOSSING *(Please tick where applicable)*

☐ Yes, I would like my card to be embossed instantly

☐ No, please do not instant emboss my card

Note: For Instant embossing, a fee of BND5 per card is applicable and will be charged to the linked Bank account.

ROYAL SKIES MEMBERSHIP ACCOUNT INFORMATION *(Required for Royal Brunei Baiduri Visa Platinum Debit only)*

Royal Skies Membership Account Number:									

INSTANT REWARDS CARD (IR) *(Please tick where applicable)*

☐ I would like to apply for a **personalized** Instant Rewards Card and link it to my debit card (fee of BND15 is applicable)

Name to appear on card *(Max 19 Characters only)*

Instant Rewards Personalised Card Only **(Personalisation Fee Applies)*

☐ I would like to apply for a pre-embossed Instant Rewards card / I already have an existing Instant Rewards Card and would like to link it to my debit card

Please provide the Instant Rewards Card Number:

6	0	1	6	0	0										

Expiry Date: _____

MASTERCARD CASHCARD *(For Mastercard Smart Executive Platinum & Prestige World Debit Only) (Please tick where applicable)*

☐ I would like to apply for a **personalized** Mastercard CashCard and link it to my Mastercard Smart Executive Platinum Debit / Mastercard Prestige World Debit (fee of BND15 is applicable)

Name to appear on card *(Max 19 Characters only)*

Mastercard CashCard Personalised Card Only **(Personalisation Fee Applies)*

☐ I would like to apply for a pre-embossed Mastercard CashCard / I already have an existing Mastercard CashCard and would like to link it to my Mastercard Smart Executive Platinum Debit/ Mastercard Prestige World Debit

Please provide the Mastercard CashCard Details *(for non-personalized card only)*

5	5	7	7	5	8	X	X								

C	A	S	H	C	A	R	D											

☐ I would like to link my account below to my Mastercard CashCard (for payment transfer via ATM)

Bank account to be linked

ENDORSEMENT

I shall be bound by Baiduri Bank Berhad's Term and Conditions relating to the Baiduri debit card(s) once this application is accepted by Baiduri Bank Berhad. I understand that Baiduri Bank Berhad has the right to decline this application without any reason.

I hereby confirm having received the Product Disclosure Sheet and understand the explanation given in my preferred language.

_____ Signature of Applicant

SV

_____ Date:

FOR BANK USE

Caution List

List	Date	Yes	No
Bankruptcy			
Litigation			
UCA			
BFB			
UN			
OFAC			
WU			
BBB AML CFT Watch list			

CSL Screening	Name & Initial	Date
Checked & Attended by		
Confirmed by (Supervisor level and above)		

FOR BRANCH USE ONLY

Attended by:

_____ (signature)

Staff Name:

Date:

Other remarks, if any:

Branch Stamp

Checked and recommended by:

_____ (signature)

Staff Name:

Date:

PRE-EMBOSS CARD ACTIVATION

Card Number (Last 4 digit)	Name	Date	Initial
UnionPay Debit Card			
Mastercard CashCard			
Instant Rewards Card			

PROMOTION PROGRAM *(if any)*

Visa Platinum Debit

Program code: | | | | | | |

Program Expiry Date: D D M M Y Y Y Y

RB Visa Platinum Debit

Program code: | | | | | | |

Program Expiry Date: D D M M Y Y Y Y

Visa Classic Debit

Program code: | | | | | | |

Program Expiry Date: D D M M Y Y Y Y

Visa Supasave Debit

Program code: | | | | | | |

Program Expiry Date: D D M M Y Y Y Y

FOR CARD CENTRE OPERATIONS USE ONLY

Card Number – **Visa Platinum Debit** _____

4	2	1	5	0	4	X	X	X	X	X	X				

Card Number – **RB Visa Platinum Debit**

4	2	1	5	0	4	X	X	X	X	X	X				

Card Number – **Visa Classic Debit** _____

4	2	1	5	0	4	X	X	X	X	X	X				

Card Number – **Visa Supasave Debit** _____

4	2	1	5	0	4	X	X	X	X	X	X				

Card Number – **Union Pay Debit** _____

6	2	1	2	5	7	X	X	X	X	X	X				

Card Number – **Mastercard SE Platinum Debit** _____

5	3	2	6	5	6	X	X	X	X	X	X				

Card Number – **Mastercard Prestige World Debit** _____

5	3	2	6	5	6	X	X	X	X	X	X				

Card Number – **Mastercard CashCard** _____

5	5	7	7	5	8	X	X	X	X	X	X				

Card Number – **Instant Rewards Card**_____

6	0	1	6	0	0	X	X	X	X	X	X				

CCO Input	Initial	Date
Inputted by		
Checked & Authorized by		
Final Checked by		