

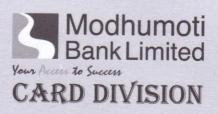
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Date.		-	346	222	2	31	2	7

## **Head of Card Division**

Modhumoti Bank Limited

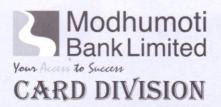
## **CIB UNDERTAKING**

Head (	Office, Dhaka.															
Sub: I	Provision of information	on on the ov	vnershi	p of con	npan	ies &	the	eir B	ank	lial	oiliti	ies.				
	Sir, pplying for sanctioning My personal details are			ling of a	loan	in m	y or	wn n	ame	/ af	oren	nenti	oneo	d co	mp	any's
Name		-	: <u>.</u>													
Owner	r/Partner/Director/Guara	antor of	:													
Land I	Phone Number/ Mobile	Number :	:													
Gende	r: Male Fer	male			Da	te of	Bir	th 🗌	D	D	М	М	Y	Y	Y	Y
Distric	et of Birth:			Co	intry	of Bi	irth	:								
Nation	nal ID Number	/									I					
Passpo	ort/Driving/Commission	er ID No :						I								
Issuing	g date : D D M	M Y Y	YY	Issu	ng C	ountr	y: .									
e-TIN	Number															3.19
Father	's Name:			Moth	er Na	me:										
Spous	e's Name (if applicable)															
	at Address  f companies under the o	wnership of	: 	ong wit												
SI.	Name of Company	Present ac					Whether the company is availing any loan or not									
								Yes				1	No			
								Nar	ne of	Bank	/FI	Name	of Br	anch	1	
	Market Barrier									S_ 0 F	ř.					
												-			_	
Apart	from the stated above,	if any liahi	lity in n	av name	/mv	comn	anv	'e' n	ame	ic f	oun	d I v	azill	he l	2011	nd to
obey a	any decision made by the d for and I will be response	ne authority	concern	ed relat	ing to	san	ction	ning	rene	ewal	/res	ched	uling			
Bank	Officer's Signature				Cust	omer	's S	igna	ture							
Name	:				Nam	e:										
Date:					Date	:										
Seal:					Name of the Borrowing Organization:											



UNDERTAKING for International Credit Card  Date: d d m m y y y y
The Head of Card Division  Modhumoti Bank Limited  Head Office, Dhaka.
Sub: Personal Undertaking for International Credit Card under Travel Quota.
Dear Sir,
In consideration of your agreeing to issue an International Credit Card, I, do hereby affirm & undertake a follows:
1. The Credit Card issued in my Name & favor shall be utilized strictly in accordance with relevant exchange control regulations in force from time to time & shall be responsible for its misuse (if any)
2. I shall be liable to pay any sum billed to my Card Account against the Card issued in my favor without your need to prove or to show grounds or reasons for your demand for the sum specified therein.
3. I shall be liable to pay the principal interest charges, commission etc thereon without any question whatsoever upon your first written demand.
4. In the event of failure to comply with any of the rules & regulations relating to the issuance of the said Card or in liquidating the outstanding against the said Card, I shall be liable for action under Foreign currency rules & regulations imposed by Bangladesh Bank and be debarred from Modhumoti Bank Limited Credit Card facility either at your instance or by Bangladesh Bank.
5. The undersigned is also very much aware that Travel Quota entitlement of Bangladeshi nationals is set a USD per calendar year for visits to countries other than SAARC and Myanmar. Whereas Quota for SAARC member countries and Myanmar is USD for travel by air.
6. I hereby irrevocably undertake that I shall never avail more than my Travel Quota entitlement during one calendar year as per exchange control regulation of Bangladesh Bank and I also undertake to keep Modhumoti Bank Limited indemnified & harmless from any violation/deviation of the existing rules.
7. This undertaking shall be binding on me as well as on my heirs, successors and assigns.
The details of my particulars are:
Signature of the Applicant Name of the Applicant :
Current Address :

Phone/ Mobile



## **Bank Statement Verification**

Date: d d m m y	у у у		
The Head of Branch			
Bank L	imited		
Sub: Authorization for ver	rify my Bank Account S	tatement.	
Dear Sir,			
Credit Card in Modhumo	oti Bank Limited and su	am an accountholder of your I bmitted account statement mai the statement from your end.	
Hence, I may request your and requested by Modhumo		erify the below mentioned acco	ount statement as attached
The detail of my account is:	:		
Account Name			
Account Number			
Date of Birth	:		
NID Number	:		
Father's Name	:		
Mother's Name	:		Specimen Signature
It may be mentioned that, providing the above service  Your kind co-operation in the	da .	leduct any charges (if applical	ble) from my account for
Thanking you			
(Signature)			
Name:			
Phone:			