punjab national bank (International) Limited

(Authorised by the Prudential Regulation Authority and Regulated by the Financial Conduct Authority and the Prudential Regulation Authority)

BO: _____

SORT CODE: 60-95-00   SWIFT (BIC) CODE: PUNBGB22

CUSTOMER REQUEST FORM

Misc. /   /

Date: ____/____/201

Customer's Account Number:
Customer ID:

Customer's Name: Mr. / Mrs. / Ms _____

Request for miscellaneous services, please tick (√), whichever is applicable:

(√)	S. No.	Type of Request	Details
	A	**Change in Address**	New Address_____ _____ Old Address: _____ _____
	B	**Change in Phone Number**	New Number:
	C	**Issuance of new Debit Card**	If yes, please provide security information form
		Issuance of new PIN	
	D	**Request for Chequebook**	No. of cheque books required
	E	**Pay-in book request**	No. of Pay-in-books required
	F	**Request for A/c Statement**	From (period) to (period)
	G	**Issuance of Net Banking**	**Login Password Transaction Password**
	H	**Request for A/c activation**	If yes, please provide new KYC documents
	I	**Issuing Balance Certificate**	
	J	**Stop payment**	
	K	**Any other service** (Please mention details)	

**Tax Residence information (Please encircle whichever is applicable)

a) Are you a US citizen or tax resident?   Yes/No

b) Do you have tax residency in UK? Yes/No

c) Do you have any tax residency other than UK/US? Yes/No

If you have answered yes to a) or b), please confirm that (please tick, whichever is applicable):

☐ **the Self-Certification Form is attached**

☐ **there is no change from previously submitted Self-Certification Form**

Date: _____   **Customer's signature: _____**

* Original Proof of Address required for change of address requests.
  Acceptable Address Proofs: Any Bank Account Statement / Utility Bill / Full Driving Licence / Council Tax Bill (not more than 3Months old). Bank does not accept internet printouts, credit card statement and mobile phone bill.
**Tax residence information is mandatory to be filled up

For Office use only (To Back Office, New Delhi):

Please do as mentioned above _____

Signature (CSA/ Officer)   **Signature (Officer/ Manager)**
Name: **Name:**