Supplementary Card

Relationship with Primary Applicant:

Title: Mr. Mrs. Ms. Other:

Name as it should appear on the Card:

Name:

CNIC Number:			
CNIC Expiry:		мм	ΥΥΥΥ
Date of Birth:		мм	γγγγ
Mother's Maide	n Name:		
Address:			
Nearest Landm	ark		

City: Province:
· · · ·
Residential Phone No.:
Office Phone No.:
MahilaNa
Mobile No.:
Email Address:
2
Limit Assigned to Supplementary Cardmember:

Documents Required for Supplementary Card Applicant:

Copy of CNIC

Disclaimer:

JS Bank reserves the right to modify its documentation as deemed fit by the Bank without prior notice and without any liabilities to the Bank.

Declaration of Supplementary Cardmember:

I/We, the JS Bank Credit Card (Supplementary Card) Applicant(s), agree to be jointly and severally liable for all transactions processed by the use of the JS Bank Credit Card(s) applied for and issued by JS Bank to the Primary Card applicant and/or myself and acknowledge that the use of my/our JS Bank Credit Card(s) will be subject to the Terms and Conditions of the JS Bank Credit Cardmembers' Agreement (which may be amended from time to time at JS Bank's sole discretion) accompanying the Supplementary Card(s).

Supplementary Cardmember's Signature

Cardmember's Signature

%

Declaration of Cardmember:

I acknowledge that I am responsible for payment of all the charges and liabilities billed by the Bank in my Statement of Account (as per the Schedule of Charges) including those of Supplementary Cardmember(s) whose cards have been/will be issued at my request and which are guaranteed by me.

I warrant that all information stated herein and in my attachment hereto or otherwise provided to the Bank by me or at my request is true and accurate in all material respects. I understand that in the event of approval of my application I will be supplied with the JS Bank Credit Card together with a booklet containing the Terms and Conditions of the contract between us in respect of my JS Bank Credit Card and any Supplementary Card(s) issued in such connection, along with the Schedule of Charges applicable.

I hereby acknowledge and agree that in the event that I have not been provided with the Terms and Conditions Package, it shall be my sole responsibility to inform the Bank of the same and request for the Terms and Conditions. I agree that using the Credit Card signifies adherence to the Terms and Conditions mentioned on the Bank's website and Terms and Conditions' booklet.

I acknowledge that the Bank may vary the applicable charges in the Schedule of Charges at the Bank's discretion, which may be notified to me by the Bank in any manner deemed fit by the Bank and provided I continue to use the cards(s) after receipt of such notification by me, I shall be deemed to have acknowledged, unconditionally accepted and agreed to the notified amended Schedule of Charges.

I agree that the Bank shall be liable to make any deductions in respect of tax under the Income Tax Ordinance, 2001 or any such charges that may be applicable from time to time, from any payment made by the Bank to any merchant and/or services provided by such merchant to me and if any liability is attached to the Bank, or is imposed upon the Bank, due to such non-deduction, that shall be recovered by the Bank from me as valid charges and liability may be debited to my Card account.

I also undertake and declare that the Bank has the right to refuse my application, extend its processing period or withdraw and/or reject any offer without providing any reason whatsoever and the same shall not be challenged by me in any circumstances.

In case my application is rejected, I will not ask JS Bank to return the documents attached with the application.

The assigned credit limit approved is subject to the Bank's credit policy. Certain restrictions may apply. I authorize the Bank to share my assigned credit limit with my Supplementary Cardmember(s).

I agree and undertake that JS Bank may divulge my information in circumstances in accordance with practice necessary or appropriate for the bank to divulge such information to any third party without prior information to the customer.

I hereby authorize the bank to obtain information/data regarding my financial and personal details from any credit bureau, agent, banks, financial institutions, companies, for the purpose of processing my application and monitoring my facilities/account. Further, I authorize the bank to disclose and share information/data about my account/facilities to/with any credit bureau, agent, banks, financial institutions or companies as the bank considers appropriate from time to time.

I fully agree and give my consent on utilizing the Credit Card(s) on various alternate delivery channels or on cross border/international transactions.

I hereby irrevocably authorize the Bank to share my account information with any third party for any purpose and/or any outsourced activity. including and not limited to printing of my credit card monthly statements, or for any other reason, as the Bank may deem necessary.

I undertake and agree that the Bank will be sharing my statement of account data with third party/vendor/courier services for printing, delivery, dispatch or any other activity related to printing, delivery and dispatch of Credit Card Statement of Account.

I agree and undertake that the drawings from my JS Bank Credit Card account will not be utilized for subscription in Initial Public Offerings (IPOs).

Signature:

I have read and agreed to the Declaration.

Primary Card Applicant's Signature:

Date:

Documents Required for Primary Card Applicant:

- Copy of CNIC
- Latest one month's salary slip (verified by the issuing authority) or
- Last six months' Bank Statement
- CF Undertaking
- Summary Box
- Other documents

For Bank Use Only:				
Branch/Service Center Code:				
Source Code (Employee ID):				
Mobile No.:				
Branch Manager/Sales Manager/TL:				
Application Refe	rence No.:			
Decision:	Approved	Declined		
	□ Cancelled			
	inneture 9 Sterer			
Credit Analyst's Signature & Stamp:				





JS Bank Credit Card **Application Form**

0800-011-22 www.jsbl.com 345 Branches in 172 Cities https://www.facebook.com/JSBankLtd/



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CREDIT CARD APPLICATION FORM

Personal Details
Title:
Name as it should appear on the Card:
Father's/Husband's Name:
CNIC Number:
CNIC Expiry: DD MM YYYY
Date of Birth: DD MM YYYY
Marital Status: Single Married Other:
Mother's Maiden Name:
Educational Qualification:
Email Address:
Mailing Preference: E-statement 🗌 Print Statement 🗌
Print statement will be discontinued if you select E-statemer option.
Mobile No.:
Nationality:
Passport No.:
Residing Country:
Residential Address (Current):
Nearest Landmark:
City: Province:
Residing Since: Years Months
Residential Phone No.:

Contact No.:			
	☐ House ☐ Portion ☐ Apartment ☐ Hostel		
`hah	□ Owned □ Rented □ Parents □ Company Provided/Maintained		
Number of Depei	ndents:		
Occupation:	Business/Professional Salaried		
Employn	nent/Business Details		
Employment Type: f Salaried: f Self-employed:	Government Organization Salaried Business/Professional Private Organization Other:		
n Employment/ Business Since	Other:		
Company's Name	::		
Company's Addre	255:		
City:	Province:		
Designation:			
Dept.:	Office Phone No.:		
PABX No.:	Ext. No.:		

ontact Person/Dept.:		Phone N	o.:
revious Job De	tails:		
ddress:		(If required)	
Designation:		Phone No.:	
ervice Tenure - F	rom:	То:	
ncome Details (PKR):		
Other Monthly In	come if any (F	PKR):	
ource of Other II	ncome:		
Cards/Loa	ans Underto	aking (Annexure CF-1) ne	eds to be signed
Cards/Loa Bank	ans Underto	aking (Annexure CF-1) ne Type of Facility	Limit
	ans Underta		
Bank			Limit
Bank	with JS	Type of Facility	Limit
Bank Accounts	with JS	Type of Facility Bank For Branch	Limit
Bank Accounts	with JS	Type of Facility Bank For Branch	Limit
Bank Accounts	with JS	Type of Facility Bank For Brance Account Nu	Limit

Auto Debit Percentage: _____ Minimum (5%) _____ Maximum (100%)

Reference Details - 1
Name: Mobile No.: Phone No.: Address:
Relationship with Applicant:
Reference Details - 2
Name: Mobile No.: Phone No.: Address:
Relationship with Applicant:
Other Details Mailing Address: Home Address Office Address Sales Remarks (If any) (If any) (If any)
JS Bank Credit Protector:
Apply for JS Bank Credit Protector: Yes No JS Bank Credit Protector helps you in the unfortunate event of death, permanent and total disability. It repays your outstanding amount on your JS Bank Credit Card in case you're unable to repay due to the mentioned circumstances. Furthermore, it also provides your family an additional 100% of the outstanding along with clearance of your dues to the Bank. JS Bank Credit Protector is charged at 0.48% of your outstanding amount. I want to avail the JS Bank Credit Protector facility being offered with JS Bank