capital out of Sri Lanka. I/We am/are aware that certain ATM machine/bank/counter restrictions may apply to usage of my/our Credit Card/s in Sri Lanka and overseas. I/We affirm that I/We shall surrender the Credit Card(s) to the Bank and settle all dues in full in the event I/We migrate or leave Sri Lanka for overseas employment. I/We agree that the Bank reserves the right to hold any funds up to the entire credit limit given if necessary.

I/We declare that all details given by me/us on this application are true and correct and I/We undertake to use my/our International Electronic Fund Transfer Card/Credit Card, Debit Card(s) abroad solely within the limit authorized by the Card Issuing Dealer (i.e. the Bank) and affirm that the Credit Card shall only be used overseas for personal expenses such as travel expenses, hotel charges, incidental expense, medical expenses, educational expenses and purchase of goods for personal use. I/We shall not use the Credit Card for payment in respect of capital transactions, and the purchase or import of goods in commercial quantities. I/We shall not use the credit card to perform Foreign Currency Transactions on behalf of third parties. I/We undertake to surrender the international Electronic Fund Transfer Card/ Credit Card / to the relevant issuing Dealer if I/we migrate or leave Sri Lanka for employment abroad.

Charges	Joining Fee	Annual Fee
HSB Premier	FOC	FOC
Supplementary HSBC Premier	FOC	FOC

I/We further confirm that the said terms and conditions were explained to me/us at the time of me/us making this application. I/we further agree to accept and be bound by the terms and conditions of the credit cardholder agreement issued by the Bank, a copy of which has already been given to me/us or will be sent to me/us with my/our Credit Card on approval of this application and am/are aware that the Sinhala, Tamil and English versions of the said terms and conditions are available on the HSBC website – www.hsbc.lk and/or a copy of same can be obtained by me/us from any branch office of the Bank.

The information furnished by me/us in this application, whether filled by me/us or by other party request whether in my/our presence or not, was read and understood by me/us and all or any fields not completed were struck off prior to me/us placing my/our signature.

I/We confirm, that I/we am/are aware the provisions of the Prevention of Money Laundering Act No. 5 of 2006 (PMLA), the Financial Transactions Reporting Act No. 6 of 2006 (FTRA) and related guidelines and directions pertaining thereto and The Banking Act of Sri Lanka No. 30 of 1988, as amended (Act), together with the provisions of the Directions issued by the Monetary Board of the Central Bank of Sri Lanka under the aforesaid Banking Act No. 30 of 1988, as amended, including the guidelines and directions in respect of Abandoned Property in terms of such Act. I/We confirm, understand and agree that the Bank will at all times comply with such provisions as may be required with regard to the above and will all Laws, Directions and Guidelines pertaining to the Operations of a Licensed Commercial Bank in Sri Lanka.

The provisions of, and any disputes arising from, these terms and conditions shall be subject to the laws of the Republic of Sri Lanka and shall be subject to the exclusive jurisdiction of the Courts of the Republic of Sri Lanka.

Signature of the Primary Cardholder/Applicant

## CENTRAL BANK OF SRI LANKA

#### Declaration by the Applicant/s for Electronic Fund Transfer Card To:

To: Director - Department of Foreign Exchange

(To be filled by the Applicant/s to obtain foreign exchange against Credit/Debit Card or any other Electronic Fund Transfer Card)

I/We hereby confirm that I/We am/are aware of the conditions imposed under the provision of the Foreign Exchange Act, No.12 of 2017(the Act) on Electronic Fund Transfer Cards (EFTCs) subject to which the card may be used for transactions in foreign exchange and I/we hereby undertake to abide by the said conditions.

I/We further agree to provide any information on transactions carried out by me/us in foreign exchange on the card issued to me/us The Hongkong and Shanghai Banking Corporation Limited may require for the purpose of the Act.

I/We am/are aware that the Authorized Dealer (Bank) is required to suspend availability of foreign exchange on EFTC if reasonable ground exists to suspect that unauthorized foreign exchange transactions are being carried out on the EFTC issued to me/us and to report the matter to the Director- Department of Foreign Exchange.

I/We also affirm that I/We undertake to surrender the Credit Card/s to The Hongkong and Shanghai Banking Corporation Limited, if I/we migrate or leave Sri Lanka for employment abroad, as applicable.

Signature of the Primary Cardholder

Signature of the Supplementary Cardholder

I, as the Authorized officer have carefully examined the information together with relevant documents given by the applicant/s and satisfied with the bona-fide of these information and documents.

I undertake to exercise due diligence on the transactions carried out by the cardholder or his/her EFTC in foreign exchange and to suspend the availability of the foreign exchange on the EFTC if reasonable grounds exist to suspect that unauthorized foreign exchange transactions are being carried out on the EFTC in violation of the undertaking to bring the matter to the notice of the Director-Department of Foreign Exchange.

Signature of the Authorized Officer

on behalf of the Bank

### Important

Please complete this application in full. Insufficient information may cause delay in processing your application. To expedite processing please attach the following documentary evidence.

Copy of supplementary cardholder NIC or Passport or Driving License

• Proof of address (If different from primary cardholder)

Do not submit original/ valuable documents as these will be destroyed if application is rejected.

If an expatriate:

• Copy of a valid resident visa

Passport Copy

from any one of our branches.

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இணையத்தளத்தை நாடவும். அல்லது எமது கிளை ஒன்றில் கேட்டுப் பெறவும்.

#### Application processing

- Your application (once received by the Bank) will usually take a minimum of 10 working days to be processed if all required documentation is in order.
- If we require any additional documentation we will contact you.
- Once your credit card is approved and produced it will be delivered to the corresponding address mentioned.
- We may deliver the card to a different address than what is specified, if we are unable to deliver to the given address after verifying with you.

Should you require a translated copy of this document in the Tamil language, please visit www.hsbc.lk or request it

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இந்த ஆவணத்தின் தமிழ் மொழிபெபர்ப்பு உங்களுக்குத் தேவைப்படின், தயவுசெய்து www.hsbc.lk என்ற எமத

# Premier Supplementary Credit Card Application Form



Signature of the Supplementary Cardholder/Applicant Date

Date

Date

Date

Date

	P	ER	so	NA	l D	ET,	AIL	s				
Your existing HSBC	custo	mei	r nı	umb	ber'	÷						
Your Full name (Und	lerline	the	e su	irna	ime	e)*				 	 	-

PRIMARY CARDHOLDER DETAILS

IDE	NTIFICATION	DETAILS
Identification Type*		Passport 🗌
National Identification Nu	mber (NIC)*:_	
Passport Number*:		

If passport please	provide	the	expiry	date:
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CO	ΝΤΑΟ	ъ п		1 C
00	NIAC		- 1 A	го.

Home	lelephone	Number*	
	•		

Office Phone Number\*

Mobile Phone Number\*

Personal E mail address\*

CORRESPONDENCE ADDRESS	SUPPLEMENT
Please send all the correspondence to*: Residence Address  Office Address	Identification Type*
SUPPLEMENTARY CARDHOLDER DETAILS	Passport Number*:
Applicants for additional card should be an immediate family member of the Primary cardholder & at least 16 years old (conditions apply)	If passport please provide
Do you require a Supplementary Credit Card* Yes 🗌 No 🗌	Applicable for non-nationa
Your existing HSBC customer number	Visa number:
Title* Mr. Mrs. Ms. Other	Visa type:
Your Full name (Underline the surname)*	Visa expiry date:
	Is the Supplementary a

Name to appear on the supplementary card* (Maximum 19 characters)	
Relationship with the primary applicant*:	Town/ City*
Date of Birth* (DD/MM/YYYY)	
Gender* Male Female	Supplementary ( Primary applican
Nationality (Sri Lankan/Other) (please specify)*	Address*
Country of Birth*	
Mother's Maiden Name*:	
Do you have an immediate family member or relative who is a director or an employee at HSBC* Yes No	Town/ City*
Staff Name*:	
I or a member of my family / business associate/ business partner hold(s) a senior public office (Government, Judicial, Police or military)* Yes No	Paper Statement
If yes, please describe the nature of the relationship*:	Home Phone no
SUPPLEMENTARY IDENTIFICATION DETAILS	Office Phone no
Identification Type* NIC Passport	Mobile Phone no
National Identification Number (NIC)*:	SUPPLEMEN
Passport Number*:	Employment Sta
If passport please provide the expiry date:	Full Time
Applicable for non-nationals:	ы
Visa number:	Housewife
Visa type:	Occupation*:
Visa expiry date:	
Is the Supplementary applicant's permanent address Identical to Primary applicant's permanent address?*	Company Name

If No,	Address*

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1											

ary Cardholder's Residential Address details (if differs from cant's resident address)

Address*																

Town/ City*																				
	CREDIT CARD STATEMENT																			
Paper Statement E-Statement																				
SUPPLEMENTARY CARDHOLDER'S CONTACT DETAILS																				
Home Phone no :																				

<i>Mobile</i>	Phone	no	•

#### ENTARY CARDHOLDER'S EMPLOYMENT DETAILS

Employment Status*									
Full Time	Part Time		Self-Employed		Unemployed				
Housewife	Student		Probation		Retired				
Occupation	n*:								

me\*:

## Declaration (to be filled in the event of a Bank staff member filling in the mandate on behalf of the customer/Applicant))

I/We hereby acknowledge that the information given above is true and correct, and has been filled in from the information given by me/us to the said full knowledge, understand and consent. I/We further declare and confirm that the said ..... has filled in the form for me/us at my/our express request and I/we will not hold him/her or any of the employees of the Bank or the Bank responsible for any liability arising out of the information on the said application. I/We further state that I/we have read and understood the contents of the said application form and have signed the form voluntarily with full knowledge and understanding.

Signature of the Primary Cardholder/Applicant	Date
Signature of the Supplementary Cardholder/Applicant	Date

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This declaration is made to The Hongkong and Shanghai Banking Corporation Limited, (hereinafter referred to as "the Bank"/"HSBC") and governs all HSBC Credit Card(s) issued in Sri Lanka by The Hongkong and Shanghai Banking Corporation Limited (the "Credit Card"). By signing the below; I/We declare that the information given in this application is true and correct. I/We authorize you to confirm the information given in this application from any source you may deem fit. I/We authorize my/our bankers or any other sources to release any information to you or your representatives that you may require from time to time without reference to me/us. I/we undertake to advise the Bank immediately when information already provided in the Credit Card application has changed in order that the Bank may hold the most current and updated information in respect of the account/s at all times. I/We am/are aware that the Bank may change my corresponding address if delivery cannot be made to my preference. I/We request that an account be opened for me/us and Credit Card(s) issued as I/we request and that you renew and replace it/them until I/We surrender my/our right to use the Credit Card(s) by cutting the Credit Card(s) in half through the magnetic strip and returning both halves to you. I/We agree that my/our Credit Card(s) shall be only used subject to the terms and conditions of the credit cardholder agreement, Automated Teller Machine (ATM), Automated Telephone Banking, Personal Internet Banking and other relevant account terms and conditions issued by the Bank and I/We further agree to accept and be bound by the terms and conditions of the credit cardholder agreement issued by the Bank a copy of which will be sent to me/us with my/our Credit Card on approval of this application. I/We accept that the usage of the new Credit Card will be construed by the Bank as acceptance of the terms and conditions of the credit cardholder agreement by the cardholder/s. I/We agree that usage of the Credit Card signifies acceptance of these terms and conditions. I/We agree that the Credit Card/s will be issued subject to an internal credit verification and limits and usage of any existing Credit Card/s. I/We am/are aware that deposits or transfers to my/our Credit Card account/s or temporary limit increases will not increase my/our cash advance limit/s. I/We agree to be liable jointly and severally for all charges to the principal and additional Credit Card(s) issued on my/our request. I/We confirm and agree that I/we am/are responsible for reviewing upon receipt of the Credit Card statement/s or other notifications relating to the Credit Card/s and if I/We fail to do so, the Bank shall not be liable to me/us for any losses incurred after the time that such information should have been discovered. I/We agree not to use the Credit Card/s overseas to purchase goods in commercial quantities and for transfer of

Yes No

Your Former/ Other Names\*