

APPLICATION FOR REISSUANCE OF DEBIT CARD

Date:

The Card Dept
Bank of Baroda
Port Louis

Dear Sir/Madam

Re: Ac No-----

I kindly request you to reissue a debit card for the above account due to the following reason:

- 1. Misplaced
- 2. Stolen
- 3. Destroyed
- 4. Others(Plse Specify)-----

Any charges is to be debited from my savings account.

Thanking you

Card holder's Signature

Surname
Other Name
ID/Passport No
Address 1
Address 2

Tel/Cell Number
Primary Account Number
Secondary Account No

For office use only:

Branch :

Signature verified by:

*Signature of Supervisor/Manager/Officer
Pin Mailer Reissued on :*

Date:

Submit