

# Customer Relationship Form - Asaan Accounts

Branch: \_\_\_\_\_ City: \_\_\_\_\_ Date:   -   -

Title of Account (as per CNIC): \_\_\_\_\_

Account Type:  Current  Savings Purpose of Account:  Personal Savings  Other (Please Specify): \_\_\_\_\_

Product Name:  Asaan Accounts  Tez Tareen Asaan Remittance Account  Amal Women Asaan Account

IBAN: \_\_\_\_\_

	Applicant 1	Applicant 2
Name (as per CNIC) in Block Letters	_____	_____
Father's/Husband's Name (as per CNIC)	_____	_____
CNIC/NICOP/SNIC/POC/ARC/NARA/ Passport No./Pension book No./B- Form	_____	_____
Date of Expiry:	_____	_____
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced
Nationality	_____	_____
Date & Place of Birth	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mother's Maiden Name	_____	_____
Occupation	<input type="checkbox"/> Salaried <input type="checkbox"/> Self Employed <input type="checkbox"/> Others (specify): _____	<input type="checkbox"/> Salaried <input type="checkbox"/> Self Employed <input type="checkbox"/> Others (specify): _____
Source of Income	_____	_____
Expected Transaction Turnover	_____	_____
Correspondence Address Name and Address (Employer/Business/ Beneficial Owner in case of Housewife and Student)	_____	_____
Cell Number	_____	_____
Email Address	_____	_____
U.S Citizen/Resident/Green Card Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
U.S Indicia Address & Contact Number	<input type="checkbox"/> Yes* <input type="checkbox"/> No	<input type="checkbox"/> Yes* <input type="checkbox"/> No
	<small>*(Use standard account opening if marked Yes)</small>	<small>*(Use standard account opening if marked Yes)</small>

Special Category (if any):  Pensioner  Student  Other (specify): \_\_\_\_\_

Operational Instructions:  Singly  Either or Survivor  Jointly

Zakat Deduction: Yes/No If No  Non Muslim (Affirmation Attached)  Zakat Declaration Form (CZ 50 attached)

Next of Kin Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Cheque Book  25 leaves  50 leaves  100 leaves

**Electronic Banking Services:**

Select Debit Card Product:  PayPak-UnionPay-Golootlo  Mastercard

\*With Debit Cards you will be able to perform local and international transactions via ATM, FBL CDMs, Point of Sales (POS), and e-Commerce websites;

Name on Card \_\_\_\_\_

**Select the services required on Debit Card:**

International Transactions:  ATM/CDM transactions  Point of Sales (POS) transactions  e-Commerce transactions

SMS (Branch Banking)  Monthly  Annually

Statement Type  E-Statement\*  Paper\*\*  E-Statement Frequency  Monthly  Fortnightly  Weekly  Daily

\* I agree to receive E-Statement Only \*\* Paper Statement is available monthly only and will be charged as per SOC excluding June & December

**Electronic Funds Transfer**

Internal/External  All  ATM  Internet Banking  Mobile/App  Contact Center

**Whatsapp Banking: 0310 1786786** If your network is ported, type MNP and send it to 8756/9181

**Disclaimer:** "I/we accept all terms and conditions of Faysal Digibank Internet and Mobile Banking available on the FBL website.

I/we hereby undertake the responsibility of safeguarding my personal/confidential information and I/we shall ensure that CNIC, Date of Birth, OTP, FPIN, TPIN & activation code are kept confidential and I/we ensure that the same is not disclosed to any person voluntarily, accidentally, or by mistake resulted in any loss/damage or fraudulent transaction via Faysal Digibank Internet and Mobile Banking.

Customer understands and accepts that FBL shall not be responsible for any of the aforesaid risks and FBL shall disclaim all liability in respect of the said risks and provides explicit consent for using Digital Channel with below signature."

