



Indian Overseas Bank

Application & Declaration

Multicurrency Prepaid Travel Card

APPLICATION FORM

First Name	Middle Name	Last Name
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Date of birth <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Mother's Maiden Name <input style="width:95%;" type="text"/>		
Mailing Address in full <input style="width:95%;" type="text"/> <input style="width:95%;" type="text"/> <input style="width:95%;" type="text"/>		
Pincode <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	Phone No. <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	
Mobile No. <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	PAN No. <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	
E-mail Address <input style="width:95%;" type="text"/>		
Company Name <input style="width:95%;" type="text"/>		
Company Address <input style="width:95%;" type="text"/> <input style="width:95%;" type="text"/>		
E-mail Address <input style="width:95%;" type="text"/>		
Office Phone No. <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	Purpose of Travel <input type="checkbox"/> Business <input type="checkbox"/> Personal <input type="checkbox"/> Education	
Passport Number <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	Date of Issue <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	
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SB / CD Account Number <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>		
Name of Branch <input style="width:95%;" type="text"/>		
FCY required	<input type="checkbox"/> USD	<input type="checkbox"/> EUR
	<input type="checkbox"/> GBP	<input type="checkbox"/> SGD
	<input type="checkbox"/> CAD	<input type="checkbox"/> AUD
	<input type="checkbox"/> Others	
Amount	<input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	

Declaration:
 I hereby apply for the issue of Multicurrency Prepaid Travel Card and declare that the information included in the application is true and correct and that I am a Resident Indian / Non Resident Indian and that I am eligible to apply for an internationally valid card. I accept that Indian Overseas Bank (IOB) is entitled in its absolute discretion to accept or reject this application without assigning any reason whatsoever. It is my responsibility to abide by the terms & conditions applying to the Multicurrency Prepaid Travel Card given in annexure. I will be bound by the terms & conditions applying as may be in force from time to time and use of the card shall be deemed to be acceptance of those terms and conditions.
 I authorize IOB / its associate to verify any information or otherwise at my office / residence or to contact me / my employer / banker / credit bureau / Reserve Bank of India (RBI) or any other source to obtain or provide any information that may be required. I agree to the use of my name / address / e-mail / phone by IOB or its associates for their marketing purposes.
 I understand and acknowledge that local laws and RBI regulations lay down limits and norms for purchase and use of foreign exchange. I hereby undertake that the usage of the Multicurrency Prepaid Travel Card by me will be in accordance with the above rules and regulations in force from time to time and as per Foreign Exchange Management Act (FEMA) 1999.
 In the event of any failure on my part to do so or in the event of any information supplied by me to you being incorrect or inaccurate, I agree that I will be solely liable for any / all penalties and / or action under the local laws and / or regulations as may be in force and governing the purchase and use Multicurrency Prepaid Travel Card.

Signature of the applicant

Date : Place :

FOR BRANCH USE

KYC Compliance Checked Verify and retain passport copy

Obtain form A2 / Fema Declaration / LRS Declaration wherever Applicable dully filled and signed

Receive Payment Cash Debit to Account No.

Cheque (or) DD (or) IBSA KIT / Card Issued No.

Amount Loaded	<input type="checkbox"/> USD	<input type="checkbox"/> EUR	<input type="checkbox"/> GBP	<input type="checkbox"/> SGD	<input type="checkbox"/> CAD	<input type="checkbox"/> AUD	<input type="checkbox"/> Others	
	<input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>							

Date :