

ACCOUNT SERVICE FORM

Branch Manager Eastern Bank PLC.	Branch	Date
Lasterr Bank r Lo.		
Account No.	Account Title	
Please Arrange To: (Tick as appropriate)		
1 Issue a duplicate statement of account for the p	eriod	to
2 Issue a Bank Certificate(s):		
Balance Confirmation Certificate (BDT/FCY)		
Solvency Certificate Loan Certific Certificate for Source tax for the period		
(CASA/FD/RD/Sanchyapatra/Bond/Remittane	ce)	
3 Proof of Submission of Tax Return (PSR): (if ap e-TIN no.	•	ear
4 update Information:		
Change of Address (Mailing/ Present/ Perma	anent):	
Contact No:	Purpose	
Email:		
Please update the above information for deb		ur account
Other information update		
5 Unpaid clearing Cheque no	Tk	Drawn on Bank
6 Cancel Standing Instruction: Favoring	TK	Date
7 Other request (Please Specify):		
Authorization to collect requested items by the au		
I/ We hereby authorize Mr./ Msabove mentioned requested item(s) whose signature		
Bank from any risk and responsibilities that may arise		-
Signature of the Authorized Person:		Attested by the account holders
	of Joint Signatory	S.V. (full signature with ID)
Note: * For update information in Credit Card, please use "Card custome		
** For any information update, customer's physical present		
FOR BANK'S IN	TERNAL USE ONL	<u>-Y</u>
Deducation of Charges Tk	VAT Tk	
Branch Part:	Service Delivery part:	ation (if applicable)
Call back confirmation (if applicable) Call back confirmation (if applicable) Customer's physical presence confirmed		
CDD Review status		
Dealing Officer BM/BOM/BSSM	l	
Dealing Officer Biv/BOW/BOSW	Dealing Officer	Checker