

DECLARATION

This declaration is made to the Nations Trust Bank PLC: By signing below, I/We request that an account(s) be opened for me/us and a Credit Card(s) be issued as I/we request and that you renew and replace Credit Card(s) until I/we surrender my/our right to use the Credit Card(s) by cutting the Credit Card(s) into 4 pieces and returning all pieces to you. 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 agree that my/our Credit Card(s) may only be used subject to the Terms and Conditions of the Credit Cardmember Agreement, ATM and other account Terms and Conditions issued by the Nations Trust Bank PLC. I/We hereby confirm that copies of the relevant Terms and Conditions together with details relevant to this product were given and explained to me/us before the signing hereof and I/we have read and understood the said details, Terms and Conditions. I/We agree and accept that a further copy of the Credit Cardmember Agreement will be sent to me/us with my/our Credit Card(s), on approval of this application and I/we agree to accept and be bound by the said Terms and Conditions. I/ We specifically agree that I/we shall not use the Credit Card(s) issued to me/us and shall return the said Credit Card(s) properly destroyed as aforesaid in the event of any of the Terms and Conditions in the Credit Cardmember Agreement being unacceptable to me/us. I/We agree that the usage of the Credit Card(s) signifies acceptance of all the Terms and Conditions governing the use of the Credit Card(s). I/We hereby further accept and agree that the Bank may change revise or amend the Terms and Conditions of the Credit Cardmember Agreement from time to time at its sole discretion and I/we hereby accept and agree to be bound by such amended Terms and Conditions.

I/We agree to be liable jointly and severally for all charges to the Basic/Principal Card and the Supplementary Card(s) issued on my/our request and I/we further agree that my/our cash advance limit will be limited to a percentage of my/our permanent credit limit as shall be determined by the Bank. I/We am/are aware that deposits or transfers to my/our Credit Card account or temporary limit increases may not increase my/our Cash Advance Limit. I/We am/are aware that certain ATM machines/Bank/counter restrictions may apply to usage of my/our Credit Card(s) in Sri Lanka and overseas.

I/We am/are aware that the Bank may change my correspondence address, if delivery cannot be made to my/our preference. I/We further authorize the Bank to share my/our personal information with any Payment Association for marketing and operational matters. I/We further authorize the Bank to report any default by me/us to any credit information bureau or similar organization in Sri Lanka and/or abroad. I/We are aware that joining fees, annual fees, and fees for value added services will be charged from me/us in accordance with the Bank's prevailing rates which are contained in the Bank's Tariff Booklet and I/we agree to such fees and charges. I/We hereby warrant that the above information given in this application is true and correct. I/We accept that Credit Card(s) will be issued at the sole discretion of the Bank.

DECLARATION BY THE APPLICANT/S FOR ELECTRONIC FUND TRANSFER CARDS

To : Director - Department of Foreign Exchange

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

I/We.....(Primary/Supplementary Cardholder),
.....(Primary/Supplementary Cardholder) declare that all details given above by me/us on this form are true and correct.

I/We hereby confirm that I/We am/are aware of the terms and conditions applicable for the use of Electronic Fund Transfer Cards (EFTCs) as detailed in the **Directions No.03 of 2021 dated 18 March 2021 (Annexed)** issued under the provisions of the **Foreign Exchange Act, No. 12 of 2017** (the FEA) 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 as Nations Trust Bank PLC may require for the purpose of the FEA.

I/We am/are aware that the bank is required to suspend availability of foreign exchange on EFTC if reasonable grounds exist to suspect that foreign exchange transactions which are not permitted in terms of the annexed Directions issued under the provisions of the FEA 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 EFTCs to the bank, if I/We migrate or leave Sri Lanka for permanent residence or employment abroad, as applicable.

Further I/We also agreed to notify my/our change in residential status to the bank, if any, accordingly.

I/We have read and understood the above Declarations and Credit Cardholder Terms & Conditions.

Date:

D	D	M	M	Y	Y	Y	Y
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.....
Signature of Primary Cardholder

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Signature of Supplementary Cardholder

DECLARATION BY THE AUTHORIZED DEALER FOR ELECTRONIC FUND TRANSFER CARDS

To : Director - Department of Foreign Exchange

I, as the Authorized Officer of the bank 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. Further, I as the Authorized Officer of the bank undertake at all times, to exercise due diligence on the transactions carried out by the cardholder on his/ her EFTC in foreign exchange and to suspend the availability of foreign exchange on the EFTC if reasonable grounds exist to suspect that foreign exchange transactions which are not permitted in terms of **Directions No. 03 of 2021 dated 18 March 2021** issued under the provisions of the **Foreign Exchange Act, No. 12 of 2017** are being carried out on the EFTC, in violation of the undertaking given by the card holders and **to bring the matter to the attention of the Director - Department of Foreign Exchange.**

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Signature of the Authorized Officer on behalf of the Bank

Date:

D	D	M	M	Y	Y	Y	Y
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