

## SBC CREDIT CARD APPLICATION FORM

Please read before filling this application form

- 1/ Applicant must be 18 years of age and above
- 2/ Please fill in the application form in block letter
- 3/ Enclose a photocopy of your ID/Passport.
- 4/ You are required to place a fixed deposit of 1.25 times of the credit limit should your application be approved

### APPLY NOW

Please tick to indicate your choice

- VISA Smart Card – Classic  
 VISA Smart Card – Gold

### CREDIT DETAILS

VISA Smart Card - Classic	USD500 - USD2,000
VISA Smart Card - Gold	USD3,000 - USD10,000

### MY PERSONAL DETAILS

Full Name As In ID / Passport (Underline Surname)

- Dr  Mr  Mrs  Miss  Mdm

Name To Appear On Credit Card (Max 19 Characters Only)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
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Date Of Birth

D	D	M	M	Y	Y	Y	Y
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Number Of Dependand(s)

Gender

- Male  
 Female

Marital Status

- Single  Married  
 Divorced  Widowed

Nationality

ID / Passport No.

Home address

Length Of Stay  Years  Months

Home phone:

Fax:

Mobile phone:

E-mail:

Ownership Type

- Owned  Parents  Employer  
 Mortgaged  Rented  Others

Overseas Address (For Non-Cambodian)

Length Of Stay  Years  Months

Highest Academic Qualifications

- Primary  Secondary  High School  
 Diploma  Degree  Post Graduate

Billing Address

- To Home  To Office

### MY EMPLOYMENT DETAILS

Employment Status

- Employee  Others (please specify)  
 Self-Employed

Nature Of Business

- Government  Finance  
 Service  Others (please specify)

Current Position / Job Title

Company Name

Length Of Stay  Years  Months

Address Of Current Employer

Phone: Ext. Fax:

Name & Address Of Previous Employer

Phone: Ext. Fax:

Employment Pass No.:  
(For Non-Cambodian)

Expiry Date: 

D	D	M	M	Y	Y	Y	Y
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### MY FINANCIAL DETAILS

Annual Income

Other Income

Source Of Other Income

- Rental Income  Interest / Dividends  Others

### MY OTHER CREDIT CARDS

Issuing Bank	Credit Limit

### MY RELATIONSHIP WITH SBC BANK

Specify Account Type

Account Number 

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### MY SETTLEMENT

I would like to settle my credit account by

- 1/  Debiting my/our accounts with SBC Bank in full on the monthly due date
- 2/  Cash
- 3/  Cheque

### MY INTEREST

1. Travelling  2. Wine and Dine  
 3. Lifestyle  4. Home Entertainment  
 5. Shopping  6. Internet Shopping  
 7. Others.....

Please state the places you would likely to use your credit card

### MY FAMILY DETAILS

Mother's Maiden Name (For Security Verification In Case Of Theft)

Name Of A Relative Or Friend Not Living With You

Relationship Phone

Home Address

**MY SUPPLEMENTARY CARDHOLDER'S DETAILS**

Full name As In ID / Passport (Underline Surname)  
 Dr  Mr  Mrs  Miss  Mdm

Name To Appear On Credit Card (Max 19 Characters Only)  

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
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Relationship To Principal Applicant

Date Of Birth Number Of Dependant(s)  

D	D	M	M	Y	Y	Y	Y
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Gender Marital Status  
 Male  Single  Married  
 Female  Divorced  Widowed

Nationality ID / Passport No.

Home address

Length Of Stay  Years  Months

Home phone: Fax:

Mobile phone: E-mail:

Name & Address Of Previous Employer

Phone: Ext. Fax:

Annual Income Monthly Spending Limit To Be Allocated  
(To Be Filled In By Principle Applicant Only)

**MY DECLARATION**

By signing below  
 1/ I/we ask that an account be opened for me/us and card(s) issued as I/we request, and that you renew and replace it/them until termination. I/We agree to be bound by the SBC Bank cardmembers terms and conditions received with the card(s), unless I/we cut the card(s) in half and return both halves to you. I/We agree to be liable jointly and severally for all charges to the principal and supplementary cards issued on my/our request.

2/ I/We authorize you to obtain and verify any information about me/us as you deem fit in your absolute discretion and I/we consent to your disclosure to any of your branches worldwide or to any third party as you deem fit in your absolute discretion any information relating to me/us or to the card account.

3/ I/We warrant that all information given by me/us in this application and in any other documents enclosed is true and accurate. I/We acknowledge that in considering my/our application, you will rely on such information and that you may in your absolute discretion reject my/our application without assigning any reason therefore. I/we confirm that at the time of this application, I/We am/are not undischarged bankrupt(s) and no statutory demand has been served on me/us nor legal proceedings commenced against me/us.

**PHOTO(S) AND SIGNATURE(S)**

Principal Applicant Supplementary Applicant

Please write your name On the aback of your photo and paste here	Please write your name On the aback of your photo and paste here
Signature	Signature
Name	Name
Date	Date

**DOCUMENT REQUIRED**

Please complete this form and send it with a photocopy of your ID/Passport and photo.  
 For non-Cambodians: in addition to the above, a copy of your valid Employment Pass.

**INFORMATION**

<b>Interest Free Period</b>	<b>14 Days</b>
<b>Interest Rate For Purchase</b>	<b>1.5% Per Month</b>
<b>Minimum Monthly Repayment</b>	<b>20% of Outstanding Balance</b>
<b>Late Payment Penalty</b>	<b>5% of Minimum Monthly Payment</b>
<b>Cash Advance Fee</b>	<b>USD 5.00</b>
<b>Cash Advance Interest</b>	<b>2% Per Month</b>

**ANNUAL FEE**

Type of Cards	Principal	Supplementary
VISA Smart Card - Classic	USD 25	USD 15
VISA Smart Card - Gold	USD 55	USD 35

**FOR BANK USE**

Principle card account number

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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Credit Limit 

U	S	D				
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 Expiry Date 

D	D	M	M	Y	Y	Y	Y
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Supplementary card account number

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

<b>Status</b>	<b>Officer's Name &amp; Sognature</b>
<input type="checkbox"/> APV <input type="checkbox"/> RJT <input type="checkbox"/> KIV	
	Date