

# Personal Visa Card Application form



Form to be used for the issuing of a Visa card to an account with  
Trusted Novus Bank, 76 Main Street, P.O. Box 143, Gibraltar

Client no. (max. 7 digits): \_\_\_\_\_

Bank account name: \_\_\_\_\_

## 1. Name of cardholder

☐ Mr.      ☐ Mrs.      ☐ Miss      ☐ Ms.

Name on Card (Max 14 letters): \_\_\_\_\_

## 2. Address of cardholder

House No. & Street Address: \_\_\_\_\_

Town/City: \_\_\_\_\_

Post code: \_\_\_\_\_ Country: \_\_\_\_\_

## 3. Visa card

(Please tick the relevant box; for the issuing of more than one Visa card, please complete separate application forms.)

a. Type of card:

☐ Visa Debit      ☐ Visa Credit      ☐ Visa Gold (Credit)

b. Card currency:

☐ GBP      ☐ EUR      ☐ USD

c. Spending limit:

	GBP	EUR	USD
Visa Debit	1,500	2,500	3,000
Visa Credit	1,500	2,500	3,000
Visa Gold (Credit)	8,000	12,000	14,000

Please note: Visa Debit will be subject to a daily spending limit

Please note: Visa Credit will be subject to a monthly spending limit

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d. Debiting account (account designated for debiting of card transactions):

Account no.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

e. Mandatory security information

Cardholder's mobile tel.: \_\_\_\_\_

Cardholder's email address: \_\_\_\_\_

## 4. Cardholder's signature / Account Holder's signature

I/We accept and agree to be bound by the 'Visa Card Conditions of Use' as stated in the General Business Conditions and as amended from time to time.

I/We declare that all information is true and correct to the best of my/our knowledge.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Name of cardholder: \_\_\_\_\_

Signature: \_\_\_\_\_

Name(s) of

account holder(s): \_\_\_\_\_

Signature: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

## 5. For office use only (Do not write below this line)

Approved by:	_____
Type of card approved:	<input type="checkbox"/> Visa Debit <input type="checkbox"/> Visa Credit <input type="checkbox"/> Visa Gold (Credit)

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