

## APPLICATION FORM FOR EXISTING CUSTOMERS

This form is for existing BSP account customers. Submission of completed application can be through a BSP branch or emailed to **bspgold@bsp.com.pg** 

<b>SECTION A:</b>	ACCOUNT & D	IGITAL SER	VICE REQUI	ESTS					
Select Savings	Account <i>(Optiona</i>	(Optional) Select Digital Ch			annel		Preferred Card Collection Point		
Plus Saver (Interest Bearing)		Mobile Banking			Branch:				
			Personal Internet Banking			Mailing Address:			
Preferred Meth	od of communica	ition							
Email F	Phone								
SECTION B:	CUSTOMER & A	ACCOUNT	INFORMATIO	NAM) NC	DATORY)				
<b>Title</b> OMr (	Mrs Miss	○ Ms							
First		Middle Name			Last Name			Date of Birth	
EMPLOYMENT I	DETAILS			POLIT	ICALLY EXPO	SED PERSON	(PEP) DECL	ARATION	
Employment Sta	atus			Δτ	e vou related t	o a Politically	Fynosed Pe	rson?	
Full Time Employment Self Employed					<ul><li>Are you related to a Politically Exposed Person?</li><li>E.g, Politicians, their family members, and / or business associates</li></ul>				
Occupation				Name of Related Person (If applicable)					
							<u> </u>		
Industry		Annual Gros	c Calany	Desirie	fDl.td.E	) (15	1: I- I - N		
Industry			s salary	Positio	n of Related F	erson (ii app	псаые)		
		K							
Account Number				Relationship to PEP (If applicable)					
Source of Funds	Salary / Wa	ges 🗌 Bus	iness Income	Royalty	/ Dividends	Savings	Investm	ent	
SECTION C:	ADDITIONAL C	USTOMER	INFORMATI	ON	_				
Complete this s	ection only if:								
•	-								
case, only cor	contact details, or nplete the specific n advised by a BSF	fields that ha	ave changed; or					rently has on record. In this	
Mobile Number			Email						
RESIDENTIAL A	DDRESS								
Section Lot	Street Na					Suburb/To	own / Village		
District / Provinc	е			Cou	untry				
MAILING ADDRI	ESS								
РО Вох	Post Code	Country							



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## **SECTION D: ADDITIONAL OVERDRAFT FACILITY**

Additional overdraft facility is subject to assessment and approval. Please consult a Premium Customer Service Officer for more information.

## **SECTION E: CUSTOMER STATEMENT AND DECLARATION**

By signing this form:

I have read, understood, and agree to be bound by the BSP Gold Membership Terms and Conditions (T&Cs) available at www.bsp.com.pg.

1. I acknowledge and agree to the Terms and Conditions which apply to any other BSP products and services that I may access under this

3. I authorize BSP to verify the information authorities.	n this application and all supporting documentation is true, correct, and complete. provided, including conducting independent checks with the Credit Bureau and other relevant sclosing my personal information in accordance with BSP's Privacy and Consent provisions.
Customer Signature	Date DD / MM / YYYY
SECTION F: BANK CARD ISSUANCE	CE CONFIRMATION
This section is to be completed to confirm t	hat your bank card has been issued.
Customer Signature	Date DD / MM / YYYY
BANK USE ONLY	
and updated. Where applicable, a BSF	en fully completed and verified. The customer's signature and identification have been confirmed Gold account has been opened, cards issued, and mobile and/or internet banking access eted by the actioning officer and reviewed by the Branch Manager.
ACCOUNT DETAILS	CARD DETAILS
CIF Number	Card Number Ordered
	* * * * *
Transaction Account	Card Number Issued
Plus Saver Account	Branch
ACCOUNT ACCESS	LOUNGE ACCESS
Mobile Banking registered Person	al Internet Banking registered Bank Card processed BSP Gold lounge access activated
Processing Officer	Branch Manager Date
	DD/MM/YYYY
Card Issued By	Date Card Issued

DD / MM / YYYY