Platinum Credit Card Application Form

Checklist

- Original ID /Passport and Copy
- Original PIN Certificate and Copy
- Copy of utility bill (electricity, telephone, water) not more than 3 months old
- 1 (one) passport size photograph (for non-account holders)
- Payslips for the last 3 months (Original or Copy Certified by Employer)
- Certified Bank Statements for the last 6 months (for non-account holders)
PERSONAL INFORMATION (Principal Card Holder)

Mr./ Mrs./ Ms./ Dr./ Prof./ Hon. ________________________________ Other ____________________

Name ________________________________

First               Middle               Last

Date of birth ________________________________ PIN ________________________________ Nationality ________________________________

(DD/MM/YYYY)

Country of Birth ________________________________

Place of birth ________________________________

Marital Status  □ Single  □ Married  □ Divorced  □ Widowed

Number of dependents including spouse ________________________________

Gender  □ Male  □ Female

Identification Document ________________________________ Document No. ________________________________

(National ID, Passport, Alien ID, Disciplined forces ID)

Postal Address ________________________________ Postal Code ________________________________ City/Town ________________________________ Country ________________________________

Physical Address (Residential) ________________________________

Plot No. ____________________ Length of stay at current residence in years ______  Nearest Landmark ________________________________

Is the property  □ Company House  □ Rented  □ Own House  □ Live with parents

Mobile 1 ________________________________ Mobile 2 ________________________________

Email (Preferred) ________________________________ Email (Others) ________________________________

NEXT OF KIN

Name ________________________________

Relationship  □ Spouse  □ Child  □ Parent

Other (Specify) ________________________________

Tel ________________________________  Postal Address ________________________________  Postal Code ________________________________

Town/ City ________________________________  Country ________________________________

Mother’s maiden name (or name of your choice) for security reasons ________________________________
EMPLOYER/ BUSINESS DETAILS

Employment type  □ Permanent  □ Pensionable  □ Contract  □ Casual  □ Self Employed

Other (Specify) ---------------------------------

Occupation ____________________________________ Name of Employer __________________________

Employee Department ___________________________ Employee Position ____________________________

If Self employed, State Nature of Business ______________________________________________________

Any other additional sources of income: Source ___________________________________________________

Amount per month KShs/USD _________________________________________________________________

BANKING DETAILS

CBA Account No’s.

I. ___________________________ Length of time account held ________________________________

II. ___________________________ Length of time account held ________________________________

   If you have other Bank accounts please give us details

Name of bank ___________________________ Branch ___________________________

Type of Accounts   □ Current   □ Savings   □ Deposit

Acc Nos. ___________________________ Held for ___________________________ Years ___________________

OTHER FINANCIAL DETAILS

Do you own a house or other commercial property? □ Yes  □ No

If yes what is the estimated market value and location? __________________________________________

Current mortgage outstanding ___________________________ Account Number ______________________

If you’re paying rent for your current accommodation, what is the rent per month? ________________

Other loans/Credit _______________________________________________________________

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<tr>
<th>NAME OF LENDER</th>
<th>MONTHLY PAYMENT</th>
<th>CURRENT BALANCE</th>
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OTHER CREDIT CARD DETAILS

Issuer (Name of Bank) ___________________________ Credit Limit ___________________________

Card No. ___________________________ Held since ___________________________

Issuer (Name of Bank) ___________________________ Credit Limit ___________________________

Card No. ___________________________ Held since ___________________________

CBA Credit Card limit requested for: KES ___________________________

ADDITIONAL CARD HOLDER

Do you wish to have a card issued to another member of your family*? If yes, please provide their details and signature below

(Must be over 18 years old)

☐ Yes ☐ No Limit ___________________________

*Please attach one coloured passport size photograph and original ID/Passport of the additional cardholder.

Name ____________________________________________ Other ___________________________

Mr./ Mrs./ Ms./ Dr./ Prof./ Hon. ____________________________________________

Employer (If applicable) ___________________________ Occupation ___________________________ Date of birth ___________________________

Tel No. ___________________________ Mobile No. ___________________________ Country of Birth ___________________________

Place of birth ___________________________ Passport No. ___________________________ Country of issue ___________________________

Nationality ___________________________ Relationship to principal card holder ___________________________

Email Address ___________________________

Please issue me with a supplementary card as indicated above. I warrant that the information given in the application form is true and complete and I authorize you to make any inquiries necessary in connection with this application. I have read, accepted and agree to be bound by the CBA VISA Card General Terms and Conditions of use (as amended from time to time).

Signature of additional cardholder ___________________________ Date ___________________________

CARD DELIVERY

Please indicate which CBA Branch you wish to collect your card(s) from.

Branch/Specify ___________________________
REFEREES

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<th>Referee 1</th>
<th>Referee 2 (must be a relative)</th>
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<tr>
<td>Full Name</td>
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<td>Relationship</td>
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<td>No. of years acquainted</td>
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<td>Nationality</td>
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<tr>
<td>Tel. Home</td>
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<td>Tel. Work</td>
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<td>Tel. Mobile</td>
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<tr>
<td>Physical address Work/Residence</td>
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<tr>
<td>E-Mail Address</td>
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</tbody>
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RECREATION INTERESTS (please tick as appropriate)

- Art/Antiques
- Fine foods/Wine
- Photography
- Athletic/Other Activity sport
- Foreign travel
- Tennis/Other Racket sports
- Bicycling/Mountaineering/Hiking
- Golf
- Water sport
- Dance/Ballet
- Health club/gym
- Others (please specify)
- Equestrian sports
- Music/Theatre

PLATINUM CREDIT CARD FEE

Joining
Annual Subscription fees
Supplementary Card
For any additional Card

KShs. 5,000
KShs. 7,000
Free for first 5 cards
KShs. 2,000

We expect 100% payment of the amount due as per the credit card statement otherwise Interest will be charged. Interest, where applicable, is charged on a monthly basis.

Interest rate (Kshs. credit card) Annual rate of up to the prevailing CBR plus the Banks Margin currently at 4%.

Interest rate (USD Credit card) Currently at 3.5%.

CBR refers to Central Bank Rate which is advised from time to time by the Central Bank of Kenya (CBK) The Banks margin is also subject to change which will be advised from time to time.

AUTO PAY INSTRUCTIONS (mandatory)

This facility allows automatic debiting of your CBA Current Account or Savings Account for settlement of your monthly statements.

How does it work?

Payment is made automatically from your nominated CBA account in accordance with your instructions to settle your CBA Visa Card Account. If the debit instructions fail, this will attract an Autopay Failure charge.
Safety
No payment is made unless you have authorized us to do so.

Control
You remain in total control. You can cancel the authority simply by informing us in writing. You will be advised in advance on your monthly statements from CBA of the amounts due and when they will be charged to your bank account. Should you have a query about payment, you may contact us for immediate action.

AUTO PAY INSTRUCTIONS (mandatory)
Please indicate the percentage of the outstanding amount to be debited monthly. (min 20%)
Percentage ____________________________

Account Name ____________________________

Account Type ____________________________

Account No. ____________________________

INSTRUCTION TO THE BANK
I/We instruct you to pay autocredit payments from my/our account at the request of CBA VISA CARD.
The amounts are variable and are to be debited on various dates (but not to exceed total amount outstanding on due date).

Authorized Signatory ____________________________ Date ____________________________

Authorized Signatory ____________________________ Date ____________________________
DECLARATION

1. I have read and understood or have been explained to (in a language I understand) the General Terms and Conditions referred to herein and which form part of this Application Form and which are also available in all CBA branches or website www.cbagroup.com and I agree to be bound by them. I acknowledge that I am bound by any variation the Bank makes to these documents.

2. I confirm and warrant that all information (including any documents) I have given to the Bank in connection with this application is correct, complete and not misleading. If any of the information provided is incorrect or misleading I will be personally liable for the same. I undertake to promptly notify the Bank if I become aware that any information I have given changes, is incorrect or misleading.

3. I agree that the Bank will send all correspondences in electronic form using email or any other electronic media advised to the Bank herein or as may be advised from time to time in writing. However, the Bank reserves the right to send paper correspondences to me by post to my last known address as per the Bank’s records. It shall therefore be mandatory for all customers to provide an electronic address, facsimile or email.

4. I represent and warrant that I have all the necessary power and authorisations to own assets, carry on business, enter into each of the banking agreements and any other arrangement with the Bank to ensure compliance with my obligations under this Agreement.

5. I authorise the Bank to disclose to, and verify any of the information I have given to the Bank or my credit standing from anyone the Bank may consider appropriate (such as an authority or credit reference agency).

6. I confirm that the personal information provided in this application form and that of my joint account holder (if any) or authorised person (if any) will apply to the account(s) I hold with the Bank unless I expressly tell you otherwise.

7. I consent to the Bank contacting me at the address, email address and phone numbers I have provided herein for purposes of providing information on the credit card or any other products and services that the Bank, or its strategic partners, may offer.

8. I agree and acknowledge that if I am applying for a bundled product that the Bank may vary or terminate the package offers or change the terms of the package by giving me notice. I also understand that should I wish to terminate one of the bundled products, I agree that the Bank may charge me an additional fee for the remaining product(s).

9. I agree that the Bank shall have the right to set off any amount that may be outstanding on my card account at any time against any other of my/our account with the bank in the event of default. I authorise the Bank to purchase such foreign currency with the monies standing to the credit of my account(s) as may be necessary, to effect the set off and settle any outstanding card facility where necessary. I agree that where any amounts in my/our accounts is held as security, that security over the funds will not be released or discharged until the full repayment of the facility(ies). I further agree that I shall lay no claim whatsoever to the funds held under security until such time the facility is repaid in full.