



PERSONAL VISA CREDIT CARD APPLICATION FORM

Please complete in blue or black pen and print in clear CAPITAL LETTERS

1. PERSONAL DETAILS	
Title: (eg. Mr/Mrs/Miss/Ms)	Surname:
First Name(s):	Maiden Name:
National ID No:	Passport No: Driver's Licence No:
Citizenship:	Country of Birth:
Place of Birth:	Date of Birth: D D M M Y Y Y Y Gender: (Please tick) Male Female
Marital Status: (Please tick) Single	Married Divorced Widowed Separated
2. ADDRESS DETAILS	
Postal Address:	
Residential Address:	
Telephone No: Home	Mobile Fax
Email:	
Type of Accommodation: (Please tick)	Flat House Other
Ownership of Residence: (Please tick)	Owned not mortgaged Owned but mortgaged Rented
Provided by employer	Staying with parents Monthly Mortgage Repayment / Rent \$
3. EMPLOYMENT DETAILS	
Employer's Name:	
Employer's Name: Employer's Physical Address:	
	Business Telephone No:
	Business Telephone No: Mining Commerce Transportation Farming
Employer's Physical Address:	
Employer's Physical Address: Employment Sector: Manufacturing	Mining Commerce Transportation Farming
Employer's Physical Address: Employment Sector: Manufacturing Other: (Please specify)	Mining Commerce Transportation Farming Job Title Casual Contract Self-Employed Retired
Employer's Physical Address: Employment Sector: Manufacturing Other: (Please specify) Employment Status: Permanent	Mining Commerce Transportation Farming Job Title Casual Contract Self-Employed Retired
Employer's Physical Address: Employment Sector: Manufacturing Other: (Please specify) Employment Status: Permanent Period of Current Employment: Less	Mining Commerce Transportation Farming Job Title Casual Contract Self-Employed Retired than 2 years 2-5 years 6-10 years Over 10 years
Employer's Physical Address: Employment Sector: Manufacturing Other: (Please specify) Employment Status: Permanent Period of Current Employment: Less Basic Monthly Salary:	Mining Commerce Transportation Farming Job Title Casual Contract Self-Employed Retired than 2 years 2-5 years 6-10 years Over 10 years
Employer's Physical Address: Employment Sector: Manufacturing Other: (Please specify) Employment Status: Permanent Period of Current Employment: Less Basic Monthly Salary: 4. BANKACCOUNT DETAILS Bank Name:	Mining Commerce Transportation Farming Job Title Casual Contract Self-Employed Retired than 2 years 2-5 years 6-10 years Over 10 years Net Salary: Salary Date:
Employer's Physical Address: Employment Sector: Manufacturing Other: (Please specify) Employment Status: Permanent Period of Current Employment: Less Basic Monthly Salary: 4. BANKACCOUNT DETAILS Bank Name:	Mining Commerce Transportation Farming Job Title Casual Contract Self-Employed Retired than 2 years 2-5 years 6-10 years Over 10 years Net Salary: Salary Date: Branch: Account No:
Employer's Physical Address: Employment Sector: Manufacturing Other: (Please specify) Employment Status: Permanent Period of Current Employment: Less Basic Monthly Salary: 4. BANK ACCOUNT DETAILS Bank Name: Type of Account: Current: Salary	Mining Commerce Transportation Farming Job Title Casual Contract Self-Employed Retired than 2 years 2-5 years 6-10 years Over 10 years Net Salary: Salary Date: Branch: Account No: avings: Other: (Please specify) ths 6mnths—2yrs 2-4yrs 4-6yrs Over 6yrs
Employer's Physical Address: Employment Sector: Manufacturing Other: (Please specify) Employment Status: Permanent Period of Current Employment: Less Basic Monthly Salary: 4. BANK ACCOUNT DETAILS Bank Name: Type of Account: Current: Salary:	Mining Commerce Transportation Farming Job Title Casual Contract Self-Employed Retired than 2 years 2-5 years 6-10 years Over 10 years Net Salary: Salary Date: Branch: Account No: avings: Other: (Please specify) ths 6mnths-2yrs 2-4yrs 4-6yrs Over 6yrs verdraft Limit \$ Loan Repayments \$
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6. TRADE REFERENCES				
Credit Store		Instalme	ent\$	Balance\$
Credit Store		Instalme	ent\$	Balance\$
7. SPOUSE'S DETAILS				
Title: Full Name:				
Date of Birth: (format YYYY/MM/DD	D) D D M M Y	YYY		
Employer's Name:				
Employer's Address:				
Telephone No: Home:	Bus:	Cell:	Email:	
8. NEXT OF KIN (Other than Spouse)				
Title: Full Name:				
Relationship:	Reside	ntial Address:		
Employer's Name:		Employer	's Address:	
Telephone No: Home:	Bus:	Cell:	Email:	
9. CREDIT LIMIT REQUIRED				
\$				
10. CHECK LIST (including Supplem	entary Card Holders als	<u> </u>		
(A) Current Payslip:	(b) Proof of Residence ((latest utility bill):	(c) National I	dentification Card/Passport:
(d) Passport size photo:				_
11. SUPPLEMENTARY CARDS (To be	completed only if require	ed)		
Applicants must be over 18 years of	age and immediate famil	y members of the principa	al cardholder.	
Title: Surname:		First Na	me(s):	
National ID No:		Relationship:		
Limit for supplementary Cardholder	(within the Principal Card	dholder's limit): \$		
Please issue a supplementary card principal Cardholder. The issue of th				conditions of this agreement as
Signature:			Date	:
L			<u>-</u> 7	L
Signature of Principal Cardholder:			Date	c



2.	DIRECT DEBIT AUTHORITY	
	I authorise NMB Bank Card Ce	ntre to debit my account each month and credit my Credit Card as follows: (Insert X where applicable)
	Minimum amount due as reflec	ted on my statement (10%)
	The total amount (100%) due a	s reflected on my statement
	NMB Bank Account Number to	be debited
	close or transfer my bank acco	m against the Bank in the event of the payment not being paid on due date for any reason whatsoever. Should bunt I must advise the NMB Bank Card Centre of my new account number. This instruction is to remain in force to the Bank. This instruction supercedes any previous mandate.
	Signature:	Date:
3.	TERMS AND CONDITIONS	
Ve:	at NMB Bank kindly request you	, our valued customer, to read these terms and conditions as you will be governed by them.
	13.1 DEFINITIONS	
	"Card"	means NMB Bank Visa Credit Card.
	"Cardholder"	means the Principal Cardholder or Main Cardholder and any other person who has been issued with a card of the Principal Cardholder's request.
	"Principal Cardholder"	means the person in whose name the card account is maintained.
	"Supplementary Cardholder"	means a person to whom an additional card has been issued at the request of the Principal Cardholder.

"PIN" means Personal Identification Number.

"Bank" means NMB Bank Limited and any branch, agency, division, and department of the Bank.

"Voucher" means sale or refund slip for purchase made or goods returned.

"Cash Advance Fee" means the fees charged on obtaining cash from the card account through the ATM or Bank displaying Visa

means any payments made or cash advance obtained through the use of the card electronically or manually.

acceptance sign.

"Late Payment Fee" means penalty fee charged when minimum monthly payment due is received at Card Centre after the

payment due date.

"Supplementary Card Fee" means fees charged for issuance of an additional card as requested by the Principal Cardholder.

"Over Limit Fee" means a penalty fee for unauthorized spending over the approved credit limit.

13.2 INTEREST

"Card Transactions"

Interest is calculated on the outstanding daily balances, compounded and charged on a monthly basis. The rate of interest is determined by the Bank and is subject to change from time to time in line with market conditions. Interest charge will be shown on the monthly statements and is effective from the transaction date.

13.3 REPAYMENTS

Minimum monthly repayments of 10% of the balances outstanding or \$75-00 whichever is higher, must be effected in respect of payment by installments. Cardholders can however, choose to make higher payments or the full amount outstanding.

13.4 LOSS OF CARD

When a card is lost or stolen the cardholder shall immediately notify the nearest branch of the Bank or telephone number (04) 798851/9 or email support@nmbz.co.zw. This notice must be confirmed to the Bank in writing within 7 days.



13.5 LOSSES

The principal Cardholder shall be liable for all amounts arising from or losses incurred by the bank in connection with the use of the card by the Principal Cardholder or authorized user.

13.6 TERMINATION AND RESTRICTION OF CARD USE

The Bank reserves the right to terminate or restrict the use of the card without prior notice and without giving reasons thereof.

13.7 CARD OWNERSHIP

Ownership of the card shall at all times rest in the Bank and the card shall upon request, be returned forthwith or surrendered to the Bank or any person acting on behalf of the Bank.

13.8 LEGAL AND OTHER FEES

The Principal Cardholder shall be liable for payment of all expenses incurred by the Bank in exercising any right against the cardholder for any breach of the obligations hereunder.

13.9 APPROPRIATION

The Bank shall also be entitled to allocate any payment made first to legal costs and collection commission, then interest and lastly towards capital repayment.

13.10 STATEMENTS/CERTIFICATES

Any statements issued by the Bank as to the balance on the accounts and or other matters arising in whole or in part from the use of the card shall for all purposes be conclusive proof of the facts stated therein if the cardholder fails to pay the Bank the minimum repayment by the payment due date, interest and late payment fee will be charged to the cardholders account.

Non-receipt of statement by cardholder shall not be sufficient cause for the cardholder to withhold any payment due to the Bank. Cardholders are obliged to call and enquire about the balance due on the account.

13.11 COUNTERMANDS / CLAIMS AND DISPUTES

The Bank will debit the card account with the amounts of all card transactions, any liabilities of the cardholder and any loss incurred by the bank arising from the use of the card. The Principal Cardholder will be liable to pay to the Bank all amounts debited, whether or not the cardholder signs a sale or cash advance voucher.

- Any queries on the account shall be raised within 60 days of the date of the Card Statement.
- Any claims or disputes between the cardholder and supplier shall in no way affect the Bank's right to receive payment from the card holder
- The Principal Cardholder shall not be entitled to interest on any credit balance on the card account.

13.12 VOUCHER

- The Cardholder should sign for the purchase or refund in respect of any refund granted by the supplier in respect of the purchase.
- By signing, on such voucher the cardholder confirms the information printed on the purchase or refund slip is correct.
- However failure to sign will not relieve cardholder from liability to the Bank arising from the purchase.

13.13 AUTHORITY TO DEBIT THE PRINCIPAL CARDHOLDERS ACCOUNT

The Bank shall pay on behalf of the Cardholder for purchases made and debit the Principal Cardholders Card Account. The repayment will be debited to the account nominated by the Principal Cardholder. The Bank retains the discretion to debit any other account the cardholder may have with the Bank.

13.14 SAFEGUARDING UNAUTHORISED TRANSACTIONS

The Cardholder shall exercise all possible care to prevent loss or theft of the card. He or she shall memorise the PIN and destroy any physical record thereof. In the event that the card is lost or stolen or the PIN is disclosed under any due pressure, the cardholder shall notify the Bank by telephone and confirm the same in writing. Until the Bank receives written notification, the principal account holder will be liable in respect of any use of the card.



13.15 USE OF THE CARD BY THE CARDHOLDER

The card is valid for the period specified thereon. The cardholder shall sign at the back of the card in the space provided with a ballpoint pen immediately upon receipt. All amounts due under the agreement will be payable in full on the agreed date. Any payments made to the Bank will only take effect when received at Card Centre and credited to the Account.

13.16 CARD STATEMENT

The Principal Cardholder's Card Statement shall be dispatched to the physical mailing or email address once a month.

13.17 GENERAL

The Bank shall not be liable if it is unable to perform its obligations under the agreement due (directly or indirectly) to the failure of any machine, data processing system, or transmission link or to industrial dispute or anything outside the Bank's control, its agents or contractors. If the Bank is unable to produce and send statements, the Principal cardholder's liability for interest shall continue and for the purpose of calculating interest and establishing the date on which payments are due the Bank may select a date in each calendar month as the statement date. Any change in name or address shall be notified in writing to the Bank. The agreement is governed by the Laws of Zimbabwe.

13.18 MAIL ORDER/TELEPHONE ORDER/INTERNET TRANSACTION

You agree to be liable for all such card transactions and in proving that the transaction was authorized by you, the Bank shall be entitled to rely on such documentary evidence as may be available to it which confirm that you gave your card number to a merchant by mail or other order and the Bank's right shall not be affected or defeated by reason of your not having placed, confirmed or renewed the order or received the goods or services in question.

15. OTHER INFORMATION

Please fill in the following additional information for us. It will enable us to serve you better and to improve our customer loyalty programme to include your habits and hobbies.

YOUR CHILDREN										
Name	School / University				DO	ОВ				
		D	D	M	M	Υ	Υ	Υ	Υ	
		D	D	M	M	Υ	Υ	Υ	Υ	
		D	D	M	M	Υ	Υ	Υ	Υ	
		D	D	M	M	Υ	Υ	Υ	Υ	
TRAVEL PLANS AND DETAILS										
TRAVELLE CARO ARD DETAILS	_									
How often do you fly per annum? Business	Personal									
Which Travel agency do you use?										
Given a choice, which airline do you prefer?										
Airline 1 Name:										
Airline 2 Name:										
Airline 3 Name:										
Which frequent flyer programs do you belong to	o?									
Program 1 Name:										
Program 2 Name:										
Program 3 Name:										



SPORT	
Please indicate if you are a participant (p), spectator (s), or both (b)	
Tennis Jogging Golf Cycling Cricket Rugby	
Angling Walking Soccer Gym/Exercise Squash Horse Racing	
Other	
CLUBS	
Are you a member of any club? YES NO Name of Club/Association	
Since Position	
PASTIMES/HOBBIES	
What are your favourite pastimes?	
Fashion Gardening Cinema Travel Computers Wildlife/Environment	
Art Dance Antiques/Collectables Music Literature	
Eating Out Food/Wine Theatre Charity/Voluntary	
Other (Please specify)	
YOUR FINANCIAL DETAILS	
Credit cards - which other credit cards do you hold?	
(Please specify) 1.	
2.	
3.	
Store credit cards - which store credit cards do you use?	
(Please specify) 1.	
2.	
3.	
WHAT MOTIVATED YOU TO APPLY FOR THE NMB PERSONAL VISA CREDIT CARD	
Press Advertising Electronic Mail / Advertising Television Advertising Billboard Third party referral	ı
Other (Please specify)	
16 DECLARATION	
I certify that the information given above is true and complete to the best of my knowledge. I authorise NMB Bank Limited to make any enquiries they may deem necessary for confirmation of these facts and for credit assessment. I agree to be bound by the terms and conditions of the NMB Bank Credit Card facility as amended from time to time. I understand that I will receive these terms on collection of my card. If at any time I do not wish to be bound by them I can arrange to have the agreement cancelled. In the event of any breach of these regulations I and the relevant authorised users will be exclusively responsible for each breach. I understand that the card is only valid in Zimbabwe for Zimbabwear currency transactions. I choose domicilum citandi et executandi at the residential address shown above and hereby submit myself to the jurisdiction of the magistrates court of Zimbabwe in any dispute arising from this agreement, not withstanding that at the time that proceedings are commenced I am domiciled outside Zimbabwe. I understand the Bank reserves the right to decline my application without giving reasons.	6 / e
Signature: Date:	



FOR OFFICIAL USE ONLY	
Branch:	
Application Recommended:	Yes No Recommended Limit:
Credit Officer's Comments:	
Print Name of Credit Officer:	Signature:
Date:	
Application Approved:	Yes No Limit:
Branch Manager's Comment:	
Print Name of Branch Manager:	Signature:
Date:	
OFFICIAL USE CARD CENTR	
Application reviewed by:	
Comments:	
Print Reviewer's Name:	Signature:
Application Approved:	Yes No Limit:
Card Centre Manager Commer	s:
Print Manager's Name:	Signature:
Date:	