T BANK LIMITED

POST BOX: 631
HEAD OFFICE: THIMPHU

Date: D D M M Y Y Y Y

ADDRESS CHANGE FORM

The Branch Manager
TBank LTD
……

Dear Sir/Madam,

I would like to change my Address as follows:

ACCOUNT HOLDER NAME: ……

ACCOUNT NUMBER: …….

CID NUMBER: …….

TPN /BIT No. …….

PREVIOUS ADDRESS 1: ……

NEW ADDRESS 2: ……

YOURS SINCERELY,

(Signature)

Name: ……
Address: ……....
Contact No: ……...

Note:* Please attach your CID copy along with this form*

For Bank Use only

KYC Updated/Information Verified by:
Customer Service

Approved by:
Br. Manager