T BANK LIMITED

POST BOX: 631
HEAD OFFICE: THIMPHU

Date: D D M M Y Y Y Y

SIGNATURE CHANGE FORM

The Branch Manager
TBank LTD
…….

Dear Sir/Madam,

I would like to change my signature as follows:

ACCOUNT HOLDER NAME: …….
ACCOUNT NUMBER: ..……
CID NUMBER: ……
TPN/BIT NO. …….

PREVIOUS SIGNATURE

SIGNATURE 1	SIGNATURE 2

NEW SIGNATURE

PASSPORT SIZE PHOTO	SIGNATURE 1	SIGNATURE 2

Thanking you,

(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