

Personal Information

APPLICANT ONE

Male Female
 Mr Mrs Miss Ms Dr Other _____
 Senior Minor

First name(s)

Last name

Resident of Bermuda Non-Resident of Bermuda

Home/Residential address

 Postcode
 Country

Telephone no. (home) Telephone no. (work)

Fax no. Mobile no.

Employment Information

Employer name

Occupation Date commenced (dd/mm/yyyy)

Employer address

 Postcode
 Country

If self-employed, provide details and nature of business

APPLICANT TWO

Male Female
 Mr Mrs Miss Ms Dr Other _____
 Senior Minor

First name(s)

Last name

Resident of Bermuda Non-Resident of Bermuda

Home/Residential address

 Postcode
 Country

Telephone no. (home) Telephone no. (work)

Fax no. Mobile no.

Employment Information

Employer name

Occupation Date commenced (dd/mm/yyyy)

Employer address

 Postcode
 Country

If self-employed, provide details and nature of business

FOR BANK USE ONLY

| | | |
|------------------------------|------------------------------|-----------|
| Card Approval Administrator | Loan Officer | |
| Personal Banker / CSA | Branch | Date sent |
| Customer no. (Applicant One) | Customer no. (Applicant Two) | |
| Channel code | Campaign code | |

Financial Information

APPLICANT ONE – continued

Monthly income

| | |
|---------------------------------|---------------------------------|
| Net monthly salary | Additional income |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |

Source of additional income

| | |
|---------------------------------|---------------------------------|
| Rents | Pensions |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |
| Trust monies | Tips / Gratuities |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |
| Other | <i>(please specify)</i> |
| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |

Monthly Commitments

Own home Rent

| | |
|--|---------------------------------|
| Outstanding mortgage | Monthly mortgage payment |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |
| Monthly rent payment | |
| <input type="text" value="\$"/> | |
| Mortgage holder or landlord | Telephone no. |
| <input type="text"/> | <input type="text"/> |
| Other monthly debts / obligations | |
| School fees | Car payments |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |
| Other | <i>(please specify)</i> |
| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |

Personal Assets

Accounts with The Bank of Bermuda Limited

Chequing Savings Loan Investments
 Fixed Term Deposit Call Deposit

| | |
|---|-------|
| Deposit with other banks | Bank |
| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |
| Other assets (work of art, jewellery etc.) | |
| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |

APPLICANT TWO – continued

Monthly income

| | |
|---------------------------------|---------------------------------|
| Net monthly salary | Additional income |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |

Source of additional income

| | |
|---------------------------------|---------------------------------|
| Rents | Pensions |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |
| Trust monies | Tips / Gratuities |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |
| Other | <i>(please specify)</i> |
| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |

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Own home Rent

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| School fees | Car payments |
| <input type="text" value="\$"/> | <input type="text" value="\$"/> |
| Other | <i>(please specify)</i> |
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| <input type="text" value="\$"/> | _____ |

Personal Assets

Accounts with The Bank of Bermuda Limited

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| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |
| Other assets (work of art, jewellery etc.) | |
| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |
| <input type="text" value="\$"/> | _____ |

Card Details

Gold Visa *(Credit begins at \$5,000.00)*

Requested card limit

Primary applicant name

Secondary card Yes No

Name on secondary card

Payments

I will make payment myself I authorise you to charge my

Savings account no.

Chequing account no.

Minimum payment Total balance payment

I wish to collect my credit card from:

Head Office branch Church Street branch Somerset branch St. George's branch Airport branch I wish to receive my Credit Card by mail

Classic Visa *(Credit begins at \$500.00)*

Requested card limit

Primary applicant name

Secondary card Yes No

Name on secondary card

Payments

I will make payment myself I authorise you to charge my

Savings account no.

Chequing account no.

Minimum payment Total balance payment

I wish to collect my credit card from:

Head Office branch Church Street branch Somerset branch St. George's branch Airport branch I wish to receive my Credit Card by mail

Classic MasterCard *(Credit begins at \$500.00)*

Requested card limit

Primary applicant name

Secondary card Yes No

Name on secondary card

Payments

I will make payment myself I authorise you to charge my

Savings account no.

Chequing account no.

Minimum payment Total balance payment

I wish to collect my credit card from:

Head Office branch Church Street branch Somerset branch St. George's branch Airport branch I wish to receive my Credit Card by mail

Card Details – continued

BermudaCard (Credit begins at \$500.00)

Requested card limit

Primary applicant name

Secondary card Yes No

Name on secondary card

Payments

I will make payment myself I authorise you to charge my

Savings account no.

Chequing account no.

Minimum payment Total balance payment

I wish to collect my credit card from:

Head Office branch Church Street branch Somerset branch St. George's branch Airport branch I wish to receive my Credit Card by mail

Yes No I would like to receive a free BermudaCard along with my Classic / Gold Credit Card (at no cost or fee to me).

Declarations and Signatures

APPLICANT ONE

I understand that the use of the Credit Card is subject to Credit Cards Agreement.

The information I/we have given is true and correct to the best of my/our knowledge, and nothing that might affect your decision to approve this application has been withheld.

I authorise you to release to, and collect from, any other credit provider, financial institution, consumer or commercial reporting agency or any other party that you, at your sole discretion, determine necessary to evaluate this application, my credit information which includes, but is not limited to, information about my application for personal and/or business credit, account information, creditworthiness, credit history, credit standing and credit capacity.

Print name

Signature

Date of signature (dd/mm/yyyy)

APPLICANT TWO

I understand that the use of the Credit Card is subject to Credit Cards Agreement.

The information I/we have given is true and correct to the best of my/our knowledge, and nothing that might affect your decision to approve this application has been withheld.

I authorise you to release to, and collect from, any other credit provider, financial institution, consumer or commercial reporting agency or any other party that you, at your sole discretion, determine necessary to evaluate this application, my credit information which includes, but is not limited to, information about my application for personal and/or business credit, account information, creditworthiness, credit history, credit standing and credit capacity.

Print name

Signature

Date of signature (dd/mm/yyyy)