

Credit Card Renewal / Replacement Request

Date Date
Card Number
Card Holder Name ntact Telephone Num
Card Expiry Date
Mother's Maiden Name ID Number Date of Birth Card Expiry
Credit Limit Other
I would like to request for the following:
Replacement Request Please replace the above Credit Card which I have cut into two and returned herewith for the following reason:
Wrongly Embossed Name Lost in mail Collection cases
Undelivered new/renewed cards Change in Name/signature Magnetic strip error
Unauthorised Transactions Lost/Stolen/Captured Retention effort
Other
If other, please state reason below:
Renewal Request
Early Renewal
Require Card by
Day Month Year Note: Your card will be sent to you by mail.
The replacement Credit Card number will differ from the Card number stated above. Standard Chartered Bank is under no
obligation to notify any Merchant of this change and shall not be held responsible in respect of any loss, damage or liability arising from the customer's failure to advise Merchants accordingly.
Mailing Address
Send Card to current address Amend address on records and send Card to the following address:
P. O. Box City
Tel No. (Office) Mobile
For Bank use only
Card returned / destroyed in Nigeria Yes No
On-line Card 400 Checked Yes No Account reviewed and verified by Date//
Approved by Date//
Replacement Card issued Yes No Checked by
Date issued: Date checked:
Card Operations: Name Signature
Hame

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