



**ACCOUNT UPDATION FORM**

Date: \_\_\_\_\_

Account Title / Name: \_\_\_\_\_ Account No.: \_\_\_\_\_

Kindly Tick ( ✓ ) the checkbox required for amendment.

<input type="checkbox"/>	ADDRESS
Current Mailing Address: _____	
New Mailing Address: _____	
Permanent Address: _____	

<input type="checkbox"/>	CONTACT
<b>CURRENT</b>	<b>NEW</b>
Home: _____	Home: _____
Office: _____	Office: _____
Cell: _____	Cell: _____
Fax: _____	Fax: _____
Email: _____	Email: _____

<input type="checkbox"/>	ZAKAT STATUS
<input type="checkbox"/> Enable (Zakat Declaration Form is Mandatory) <input type="checkbox"/> Disable	

<input type="checkbox"/> DIVIDEND MANDATE	<input type="checkbox"/> Activate	<input type="checkbox"/> De-Activate
A/c Title: _____	Bank Account No.: _____	
Bank Name: _____	City: _____	Branch: _____
Bank Address: _____		

<input type="checkbox"/> NOMINATION (Attested CNIC copy required)	<input type="checkbox"/> Activate	<input type="checkbox"/> De-Activate
<b>CURRENT NOMINEE (If any)</b>	<b>NEW NOMINEE</b>	
Name: _____	Name: _____	
Relationship: _____	Relationship: _____	
CNIC No.: _____	CNIC No.: _____	

<input type="checkbox"/>	MOTHER'S NAME _____
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Account Holder

Current Joint  
A/c Holder-1

Current Joint  
A/c Holder-2

Current Joint  
A/c Holder-3