



CARD REPLACEMENT FORM

BRANCH:		REQUEST DATE:	
CLIENT INFORMATION			
NAME OF CLIENT (LAST, FIRST, MIDDLE):			
ADDRESS:			
DATE OF BIRTH:	TELEPHONE/MOBILE NUMBER:	EMAIL ADDRESS:	
REQUEST DETAILS			
ACCOUNT NUMBER:	ACCOUNT NAME:	CARD NUMBER FOR REPLACEMENT:	
REASON FOR REPLACEMENT: <input type="radio"/> Lost <input type="radio"/> Captured <input type="radio"/> Upgrade to MasterCard <input type="radio"/> Others <input type="radio"/> Stolen Place: _____ <input type="radio"/> Forgot PIN (Pls. specify) _____ <input type="radio"/> Damaged/Mutilated Time: _____ <input type="radio"/> Change of Name to: _____			
CUSTOMERS ACKNOWLEDGEMENT			
<p>I hereby affirm that the foregoing facts and information as stated by me in this application are true and correct. I hereby bind myself to immediately surrender my Card which has been reported as lost in the event that the same is found. Transaction effected within 24-hours from the time I reported the loss shall be for my account.</p> <p>That the money represented by the balance in the account is my/our personal property, and that I/we have made no assignment, transfer or pledge thereof or in any manner negotiated the same with other parties.</p> <p>That I/we hereby hold Philippine National Bank free and harmless from any loss or damage that it may incur by reason of or in connection with the issuance of a new ATM Card/ Debit Card/ Cash Card.</p> <p>I agree to DEBIT MY ACCOUNT THE AMOUNT OF _____ for the processing fees or for any service charge imposed for the replacement of a NEW ATM Card/ Debit Card/ Cash Card.</p>			
_____ PRINTED NAME / SIGNATURE OF CARDHOLDER		_____ DATE SIGNED	
FOR PNB USE ONLY			
ID's PRESENTED:	PROCESSED BY / DATE:	SIGNATURE VERIFIED BY / DATE:	APPROVED BY / DATE:
_____	_____ SIGNATURE OVER PRINTED NAME / DATE	_____ SIGNATURE OVER PRINTED NAME/ DATE	_____ SIGNATURE OVER PRINTED NAME/ DATE
CARD AND PIN CONFIRMATION			
NEW CARD NUMBER:	CARD ISSUED BY / DATE:	PIN ISSUED BY / DATE:	
_____	_____ SIGNATURE OVER PRINTED NAME / DATE	_____ SIGNATURE OVER PRINTED NAME / DATE	
CARD AND PIN RECEIVED BY: <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 45%;"> _____ PRINTED NAME / SIGNATURE OF CARDHOLDER </div> <div style="width: 10%; text-align: center;"> </div> <div style="width: 45%;"> _____ DATE SIGNED </div> </div>			
Form No. ATM002			