

1. Supplementary Credit Card Application Form

2. Supplementary Credit Card Limit Setup Form

Please complete this form in BLOCK CAPITALS and in black ink.

Date (DD/MM/YYYY)

Primary Credit Card number

Credit Card number 2

Credit Card number 3

Primary cardholder name

First name

Middle name

Surname

Telephone number

Office

Residence

Mobile

1. Supplementary Credit Card Application Form

I would like a supplementary credit card to be issued for the following family member.

(Place a clear "X" inside the box. If you make a mistake, block out the entire box, and mark the correct box.)

Mr. Mrs. Ms.

First name

Middle name

Surname

Relationship

Spouse Parent Daughter/Son

Date of birth (DD/MM/YYYY)

Name as you would like it to appear on the card

Passport number

Card holder mobile number

Card holder office / residence contact number

Date of expiry (DD/MM/YYYY)

Mother's maiden name (A security feature for your protection)

Would you like to set up a spending limit per billing cycle for your Supplementary Credit Card?

Yes (Please specify) Amount per month AED , , or % of the card limit.

(The lower of the two will be rounded to the nearest 100.)

No

As a primary cardholder, I wish to apply for the supplementary credit card(s). I understand that the issuance of the card(s) is governed by the Bank's credit card agreement, and I am bound by it. I agree to honour all charges incurred by the supplementary cardholder and understand that the supplementary card(s) will be valid for as long as my primary card is valid.

I agree to the terms and conditions mentioned below.

Primary cardholder signature

1.1 Documents required

Supplementary card applicant's passport copy with valid residence visa.

Source code

2. Supplementary Credit Card Limit Setup Form

I hereby request you to change my supplementary credit card limit.

Please set the spending limit of my supplementary credit card number

to AED ,

(If second supplementary credit card)

Please set the spending limit of my supplementary credit card number

to AED ,

(If third supplementary credit card)

Please set the spending limit of my supplementary credit card number

to AED ,

I agree to the terms and conditions mentioned below.

Primary cardholder signature

Supplementary Credit Card Terms and Conditions

1. The standard Terms and Conditions of The Royal Bank of Scotland N.V. (the "Bank") that apply to the customer's credit card from time to time shall apply to this transaction.
2. All applications are subject to approval by the Bank.
3. All spending on the supplementary credit card(s) will be governed by the credit card agreement.
4. The supplementary credit card(s) statement will be sent along with your monthly statement.

Note: Instruction will be effective for your next statement.