

Service Request Form

Date/...../.....
Branch Manager
Community Bank Bangladesh Limited
Branch

To be completed at branch level

Account Number

Account Name

A. Document Issue

Kindly issue..... Copy(s) of the document(s) as indicated below:

<input type="checkbox"/> A/C Statement	From...../...../..... to...../...../.....
<input type="checkbox"/> Certificate	<input type="checkbox"/> A/C Certificate <input type="checkbox"/> A/C Balance Certificate: <input type="checkbox"/> In BDT <input type="checkbox"/> In FCY <input type="checkbox"/> Sanchaypatra Issuance/Interest Certificate <input type="checkbox"/> Loan Outstanding Certificate <input type="checkbox"/> Foreign Currency Encashment Certificate <input type="checkbox"/> Inward Remittance Certificate
<input type="checkbox"/> Tax Certificate	Year..... <input type="checkbox"/> Loan <input type="checkbox"/> DPS <input type="checkbox"/> Foreign Remittance <input type="checkbox"/> Interest Income <input type="checkbox"/> Active A/C

B. Service Request(s)

Kindly execute the following service request(s)

<input type="checkbox"/> Cheque Stop Payment Begin Cheque No..... To.....	Beneficiary..... Amount (in figure):
<input type="checkbox"/> Cheque Cancellation / Destroy Begin Cheque No..... To.....	Issuing date...../...../..... Amount (in words):..... Reason..... GD No:..... Dated:.....
<input type="checkbox"/> Fund Transfer	Beneficiary A/C Number: Beneficiary A/C Name: Amount (in figure): Justification: Amount (in words):
<input type="checkbox"/> Cheque Issuance	Cheque Issue Charge : Amount (in words):
<input type="checkbox"/> New	Debit Account number :
<input type="checkbox"/> Re-issue	Debit Account Name :
<input type="checkbox"/> Quantity <input type="text"/>	Leaves Per Book :
Previous Cheque Series No	From To

If delivery through bearer

Bearer Name:

Bearer Signature: Signature of the Account Holder for Attestation.....

I/We hereby authorize the bank to debit all scheduled charges from my/our above mentioned account.
Applicant / Account Holder 2nd Account Holder

FOR BANK USE ONLY

<input type="checkbox"/> Mode Of Operation	<input type="checkbox"/> Signature Verified	<input type="checkbox"/> Physical Presence <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Charge realized..... <input type="checkbox"/> Charge realized.....	<input type="checkbox"/> Transaction ID..... <input type="checkbox"/> Transaction ID.....
<input type="checkbox"/> Call Back Confirmation	Contact No:	Date & Time:		
Signature with seal/employee ID (For Call Back Confirmation)	Request received & delivered by (Bank Official)	Action taken and approved by (BM/BOM)		