



ཨ་ཁྲུག་རྒྱལ་ཡོངས་དངུལ་ཁང་ཚོད་འཛིན།

BHUTAN NATIONAL BANK LIMITED

PCI DSS, ISO 9001 : 2015 & ISO 27001 : 2013 CERTIFIED

MPAY Change Request Form

Date: DD / MM / 20YY

To
The Branch Manager

Mobile No:

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Email ID: _____

Registration Type: Customer Merchant

Action requested (Please tick)

User Block User Un-Block Forgot TPIN

Terminate User Link multiple accounts (Provide details below)

To Link Multiple Accounts

Primary Account Number / Name	Account Type																				
<table border="1" style="width: 100%; border-collapse: collapse; height: 20px;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table> <p>Name: _____</p>																					<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Sole <input type="checkbox"/> Any One
Multiple Accounts (if applicable)																					
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(Name & Signature of the Applicant)

For Bank Use Only

Name & Signature of Maker:

Name & Signature of Checker:

Your Relationship Bank