



BUSINESS DEBIT CARD APPLICATION FORM



Printed Name on Card (Maximum of 21 characters including spaces. Refrain from using nickname & abbreviations)

☐ Cardholder Name

☐ Company Name

☐ Both (fill-out both spaces provided above)

Request Type

☐ New Card

☐ Replacement Card

☐ Card Closure

☐ Linking of Account

Account to be linked or delinked

☐ Delinking of Account

Applicant Name (Last Name, First Name, & Middle Name)

Relationship to the Employer/Business

☐ Owner ☐ Authorized Signatory ☐ Employee

TRANSACTIONS ALLOWED

Transaction channels are by default enabled for the business debit card. Please indicate your instructions below should you want to specify enabled transaction channels.

PHP Account

Transaction Type	Default Daily Limit	Allow Not Allow
Cash Withdrawal via ATM	Php 100,000	<input type="checkbox"/> Y <input type="checkbox"/> N
Purchase – POS and Online	Php 200,000	<input type="checkbox"/> Y <input type="checkbox"/> N

USD Savings Account

Transaction Type	Default Daily Limit	Allow Not Allow
Cash Withdrawal via ATM	USD 500	<input type="checkbox"/> Y <input type="checkbox"/> N
Purchase – POS and Online	USD 4,000	<input type="checkbox"/> Y <input type="checkbox"/> N

ACCOUNT OWNER AUTHORIZATION

I hereby authorize _____ to be issued a Business Debit Card linked to _____.
I have read/ understood and accept the terms and conditions for the issuance of Business Debit Card.

Account Owner's Signature over Printed Name

Date

ACKNOWLEDGEMENT AND AGREEMENT TO TERMS AND CONDITIONS AND PRIVACY STATEMENT

I certify that the foregoing information is true and correct.

I agree that this Application Form may also serve as my application for other products of EastWest. By accomplishing and submitting this form, I acknowledge to have read, understood and consent to the Bank's Data Privacy Statement, which is publicly available at its corporate website and in its Store premises. I further consent to and authorize the collection, use, processing and/or disclosure of my personal data by the Bank and its authorized representatives, in accordance with Republic Act No. 10173 (Data Privacy Act of 2012), its Implementing Rules and Regulations, and the terms outlined in said Statement.

I accept and agree with the terms and conditions applicable to EastWest Debit Cards, which have been made available to me via eastwestbanker.com, as well as future amendments thereto.

Account Owner's Signature over Printed Name

Date

DEBIT CARD ACKNOWLEDGEMENT RECEIPT

I hereby acknowledge having received the Debit Card on the date indicated therein.

CARD Released by	Received by/Date Received	Signature Verified by
Valid IDs Presented	Type of ID	ID Number
		Date of Issue/Expiry

FOR BANK USE ONLY

Customer Number	RIM Number	Debit Card Number	Additional Remarks
Valid Identification Presented	Company Endorsement Letter Presented		
Processed By: (Employee Number, Name, Date)	Approved By: (Employee Number, Name, Date)		