

To,
The Head of Branch
_____ Branch
United Commercial Bank Ltd

Account Class Change



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Account Title _____

Account number

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Please attach
Photograph here
(Attested by Branch)

Signature

Signature

Signature admitted by:

Mobile number

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Please mention the registered mobile number for this account

(Please scan this page as the alternative of signature card)

I request to convert my above mentioned account into the account type selected below

- ☐ Retail Savings Deposit (3201) ☐ Dynamic Savings Account (3211) ☐ Retail UCB Imperial Savings (3210)
- ☐ Retail UCB Women's Savings Plus (3209) ☐ Retail Saving Deposit Non-Interest (3203) ☐ Retail UCB NRB Savings (3208)
- ☐ Others _____

I hereby confirm that the below mentioned information provided is correct and agree to pay any fees and charges applicable for the converted Account type selected above.

Purpose of Account Opening _____

Source of Income _____

Monthly Probable Income _____

Birth Place _____

Signature of Account Holder

For Branch Use

- ☐ Customer Physically Present ☐ KYC completed ☐ Customer identity verified
- ☐ Transaction profile duly filled ☐ Source of income confirmed ☐ Signature and Photograph duly filled up
- ☐ Others _____

Prepared by

Approved by (OM/Head of Branch)