

CHEQUE BOOK REQUEST FORM

Cheque Book Details

Date: / /

Number of Cheque Books to be ordered:

Account Number:

Account Title:

Delivery Instructions (please fill in ALL the information requested below)

Name: Mobile No.:

Designated Person's Photo ID # (Emirates ID/ Passport/ Driver's Licence):

Courier to Self

Courier to designated person

DISCLAIMER

In case the above - mentioned designated person, duly authorized by me, for accepting delivery is not available to receive the cheque book(s), the Bank reserves the right to contact the Authorized Signatory at the registered telephone/ mobile number to re-route the shipment accordingly. In an event of change of the designated person, it is my sole responsibility to inform the Bank accordingly. The expected delivery time of the security item is minimum 3 business days (for local delivery). I hereby declare that I have read, understood and agreed to be bound by the Bank's Terms and Conditions pertaining to cheque book. The Bank will debit the charges and commissions to my account for processing the Cheque Book Issuance Request as published on adcb.com and amended from time to time at the discretion of the Bank. I also acknowledge that the rates may differ from rates provided to other customers of the Bank and may be withdrawn or changed without prior notice. You hereby request those ADCB Offerings and/or modifications set out in this Form. You hereby declare that the information you provide in this Form is complete, true and accurate, and that the request(s) made in this Form have been duly approved and authorized. You authorize and agree to the Bank (and its Affiliates on its behalf) making enquiries and obtaining any credit references, account statements or other relevant information about you from any financial institution, regulatory body, any credit reference agency/bureau (including Al Etihad Credit Bureau and the Central Bank) and/or from any other source that the Bank considers necessary in order to verify the information provided by you and to assess your ability to meet your commitments, without taking your additional consent. Please note that in the case of New-To-Banking account relationships, based on the extracted AECB report pertaining to your company, the Bank will issue 10-leaf cheque book(s) for the initial period of six months from the date of account opening (subject to cheque book issuance fees, where applicable). After a period of six months and providing no cheques are returned (unpaid), further cheque books may be issued, as per the approved procedures. You agree to update the information you have provided to the Bank in accordance with Part 1 Clause 3 of the Wholesale Banking Terms and Conditions. You acknowledge and agree that the Bank reserves the right to reject the request(s) made in this Form in its absolute discretion and is not required to provide reasons for such rejection. By signing this Form, you agree to continue to be bound by:

(a) for all ADCB Offerings offered by ADCB - Islamic Banking, the Terms and Conditions for Shari'ah Compliant Account, which are incorporated herein by reference and available on <https://www.adcb.com/en/islamic/terms-conditions/default.aspx>.

(b) for all other ADCB Offerings, by the Wholesale Banking Terms and Conditions which are incorporated herein by reference and available on <https://www.adcb.com/en/terms-conditions/wholesale-banking.aspx>.

Authorized Signatory's Signature:

نموذج طلب دفتر شيكات

التاريخ: □□□□ / □□ / □□

تفاصيل دفتر الشيكات

عدد دفاتر الشيكات المطلوبة: □□ (يرجى الأخذ بعين الاعتبار أن كل دفتر شيكات يتضمن 0٠ ورقة)

رقم الحساب: □□□□□□□□□□□□□□□□

اسم الحساب:

تعليمات التسليم (يرجى تزويدنا بالبيانات المطلوبة أدناه)

الإسم:

صورة عن مستندات الشخص المستلم (هوية الإمارات/ جواز السفر/ رخصة القيادة):

التسليم إلى الشخص المستلم

التسليم إلي شخصياً

إخلاء من المسؤولية:

في حالة عدم تواجد الشخص المذكور أعلاه، المفوض حسب الأصول من قبلي لقبول الإرسالية البريدية، لاستلام دفتر/دفاتر الشيكات، يحتفظ البنك بحق الاتصال بالشخص المفوض بالتوقيع على رقم الهاتف/ الهاتف المتحرك المسجل لإعادة توجيه الإرسالية. وفي حالة تغيير الشخص المفوض، فإني أتحمل المسؤولية وحدي وبصفة حصرية عن إبلاغ البنك بذلك، ولا تقل الفترة الزمنية المتوقعة لتسليم دفتر/ دفاتر الشيكات عن ثلاثة أيام عمل (التسليم داخل الدولة). وأفيد بموجبه، أنني قد قرأت وفهمت وقبلت الالتزام بأحكام وشروط البنك الخاصة بدفاتر الشيكات. وأن البنك سيقوم بخصم من حسابي رسوم وعمولات تنفيذ طلب إصدار دفتر/دفاتر الشيكات المعروضة على الموقع الإلكتروني adcb.com حسبما يتم تعديلها من وقت لآخر حسب تقدير البنك. كما أقر بأن الرسوم والعمولات يمكن أن تختلف عن تلك المطبقة على عملاء آخرين ويمكن سحبها أو تغييرها دون إشعار مسبق.

المفوض بالتوقيع: