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| **Wniosek o wydanie karty dla klientów indywidualnych**  **WNIOSEK O WYDANIE KARTY DEBETOWEJ** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **Visa Classic Debetowa** | | | | | | | | | |  | | **Visa Classic Debetowa Młodzież** | | | | | | | |  | | **Visa payWave** | | | | | | | | | |  | | | | **MasterCard PayPass** | | | | | | |  | | | | **Visa payWave Podstawowy Rachunek Płatniczy** | | | | | | | | | | | | |
| **1. DANE OSOBOWE POSIADACZA RACHUNKU** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Imię/imiona | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nazwisko | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nazwisko panieńskie matki | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Numer PESEL/data urodzenia\* | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Obywatelstwo | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Dokument tożsamości: | | | | | | | | | | | | |  | | | dowód osobisty | | | | | | | | | | | |  | | | paszport | | | | | | | | | | | |  | | | | | karta stałego pobytu | | | | | | | | | | | | | |
| Seria: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Numer: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Numer rachunku bankowego, do którego ma być wydana karta: | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Imię i nazwisko do umieszczenia na karcie *( maks. 26 znaków razem ze spacjami)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2. MIEJSCE ZAMIESZKANIA POSIADACZA RACHUNKU** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1. Adres w miejscu zamieszkania na terenie RP** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ulica | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Miejscowość | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Poczta | | | | | |  | | | | | | | | | | | | |
| Kod | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **2. Adres korespondencyjny na terenie RP (podać jeżeli inny niż adres w miejscu zamieszkania)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ulica | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Miejscowość | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Poczta | | | | | |  | | | | | | | | | | | | |
| Kod | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Kraj (podać, jeżeli inny niż Polska) | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **3. Adres korespondencyjny na terenie RP (podać jeżeli inny niż adres w miejscu zamieszkania)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Numer telefonu stacjonarnego | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Numer telefonu komórkowego | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Numer telefonu komórkowego do obsługi portalu kartowego i zabezpieczenia 3D Secure | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Adres e-mail | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **LIMITY TRANSAKCYJNE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dzienny limit transakcji gotówkowych | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | zł | | | | | |
| Dzienny limit transakcji bezgotówkowych | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | zł, w tym | | | | | |
| Dzienny limit transakcji internetowych | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | zł | | | | | |
| **OŚWIADCZENIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Oświadczam, że wszystkie dane zawarte w niniejszym wniosku są prawdziwe, kompletne i zostały podane przeze mnie dobrowolnie. 2. Oświadczam, że znam i akceptuję zapisy Regulaminu otwierania i prowadzenia rachunków bankowych dla osób fizycznych. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| MIEJSCOWOŚĆ, DATA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *Podpis Posiadacza rachunku* | | | | | | | | | | | | | | | | | | | | | | | | | | | *Stempel memoriałowy i podpis pracownika Banku potwierdzającego autentyczność podpisu i zgodność powyższych danych z przedłożonymi dokumentami* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \* W przypadku braku numeru PESEL należy wpisać datę urodzenia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **WYPEŁNIA BANK**  Numer karty | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Decyzja banku | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Przyznano/~~nie przyznano~~ karty ~~Visa Classic Debetowej/Visa Classic Debetowej Młodzież~~/Visa payWave/~~Visa payWave Podstawowy Rachunek płatniczy~~  dla rachunku numer: **…………………………………………………………………………………**  z dziennym limitem transakcji: gotówkowych: ………………………………………  bezgotówkowych: …………………………………..  internetowych: ……………………………………….. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
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|  | PAWŁOWICE, | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| miejscowość i data | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | podpis upoważnionego pracownika Banku | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  | |
| Adnotacje | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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