### *Załącznik Nr 1*

*do Instrukcji wydawania i obsługi kart debetowych*

*w Banku Spółdzielczym w Krzyżanowicach*

**WNIOSEK O WYDANIE KARTY DEBETOWEJ**

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|  | **Visa Classic Debetowa** |  | **MasterCard Paypass** |  | **Visa payWave** |  | **Visa niespersonalizowana** |  | **Visa EURO** |  |  |  | **Naklejka zbliżeniowa** |  |

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| **DANE OSOBOWE POSIADACZA RACHUNKU** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Imię/imiona | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nazwisko | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | Nazwisko panieńskie matki | | | | | | | | | |  | | | | | | | |
| Numer PESEL/data urodzenia\* | | | | | | | | | | | | | | |  | | |  |  | |  |  | |  | |  |  | |  | | | |  |  | | Obywatelstwo | | | | | | | | | |  | | | | | | | |
| Dokument tożsamości:  Seria i numer: | | | | | | | | | ❑ dowód osobisty ❑ paszport ❑ karta stałego pobytu | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Numer rachunku bankowego, do którego ma być wydana karta: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Imię i nazwisko do umieszczenia na karcie (maks. 26 znaków razem ze spacjami) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **MIEJSCE ZAMIESZKANIA POSIADACZA RACHUNKU**  **1. Adres w miejscu zamieszkania na terenie RP** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ulica | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nr domu | | | | | | |  | | | | Nr lokalu | | | |  | |
| Miejscowość | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Poczta | | | | | | |  | | | | | | | | | |
| Kod pocztowy | | | |  | |  | | - | |  | |  | |  | |  | | | | | | | | | | | | | | | | | | | | | Kraj (jeżeli inny niż Polska) | | | | | | | | | | |  | | | | | |
| **2. Adres korespondencyjny na terenie RP (podać jeżeli inny niż adres w miejscu zamieszkania)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ulica | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nr domu | | | | | | |  | | | | Nr lokalu | | | |  | |
| Miejscowość | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Poczta | | | | | | |  | | | | | | | | | |
| Kod pocztowy | | | |  | |  | | - | |  | |  | |  | |  | | | | | | | | | | | | | | | | | | | | | Kraj (jeżeli inny niż Polska) | | | | | | | | | | |  | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | złotych | | | | | | | | | | |
| Dzienny limit transakcji bezgotówkowych | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | złotych, w tym | | | | | | | | | | |
| Dzienny limit transakcji internetowych | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | złotych | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **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 klientów indywidualnych.
3. Informacja o prawach oraz zgody na przetwarzanie danych osobowych znajdują się w formularzu "Klauzule informacyjne i klauzule zgód" stanowiącym załącznik do niniejszego wniosku o kartę debetową.

………………………………. ………………………………. (miejscowość, data) (Podpis Posiadacza rachunku)

*\* w przypadku braku numeru PESEL, należy wpisać datę urodzenia*

**WYPEŁNIA PLACÓWKA BANKU**

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**Data przyjęcia wniosku**

**Karta wydana do rachunku (pełny numer)**

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**Nr karty**

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**Decyzja Banku**

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(miejscowość, data) Stempel dzienny, podpis i pieczątka imienna pracownika Banku

potwierdzającego autentyczność podpisów i zgodność powyższych danych

z przedłożonymi dokumentami