$\bigcirc$	الصكوك الوطنية
	NATIONAL BONDS

## MYPLAN APPLICATION FORM

Date:

MKT/2024/09/MPAPP/02

SECTION A - CUSTOMER	PROFILE			
Customer Name: As per your registered ID with National Bonds				
Account No.:	IC	D No.:		
SECTION B - SETUP MYP	LAN			
Please issue Saving Bonds we	orth of AED In figure			
in the name of the above me	ntioned beneficiary on the	of each month, starting	on dd/n	nm/yyyy
Monthly payments are made	through Direct Debit O Dire	ect Debit ( Standing Order (	Salary Deduction mandate	
l agree to be charged a subsc	ription fee of 0.5% of the withdra	wn amount in case of redemption	or cancellation of plan before	completing 12 monthly payments.
SECTION C - UPGRADE E	EXISTING RECURRING PAYME	ENTS MANDATE TO MYPLAN	Re	f:
Monthly Payment Amount	AED	Payment date:	of each month.	
Payment Method	O Direct Debit O Standing Or	der 🔵 Salary Deduction mandate	2	
l agree to be charged a subsc	ription fee of 0.5% of the withdra	wn amount in case of redemption	or cancellation of plan before	completing 12 monthly payments.
SECTION D - CANCEL AN	EXISTING PLAN			
I wish to cancel my plan with	effect from:	dd/mm/yyyy		
If next payment due date is v	within 10 working days from cance	llation date, cancellation will hap	 pen after next payment.	
SECTION E - CONSENT A	ND DECLARATION			
	ded above is true and hereby indemnify Natio	anal Rands Corporation Solo Proprietorship I	25.C against any loss or damage that may	, be incurred due to incorrectness of such
	e read and agree to be bound by the Terms ar			
	s that affects the FATCA/CRS Tax Residency S of the change in circumstances within 30 days			incomplete or incorrect, I understand that I
SCAN FOR T&C				
	and herby consent to the terms and co	onditions available on the company's w	vebsite which is provided on the QR	code and/or the link below
T&C: https://bit.	ly/4aeJqEk			
APPLICANT SIGNATURE		FOR OFFICIAL USE ONLY		
Date:		Signature Admitted	OID Verified	O Documents Attached
Signature:			Sourced By	Approved By
		Name:		
		Signature:		
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