DECLARATION BY AUTHORIZED OFFICER OF NATIONS TRUST BANK PLC

DD/MM/YY

Signature of the Authorized Officer on behalf of the Bank

DECLARATION MADE TO THE CONTROLLER OF EXCHANGE SRI LANKA

To : The Controller of Exchange

I (Cardholder) declare that all details given above by me on this form are true and correct.

I hereby confirm that I am aware of the conditions imposed under the Exchange Control Act in the Notice published in the Extraordinary Gazette No: 1411/5 of 19th September 2005 subject to which the Card may be used for transactions in foreign exchange and I hereby undertake to abide by the said conditions.

I further agree to provide any information on transactions carried out by me in foreign exchange on the Card issued to me as Nations Trust Bank PLC may require for the purpose of the Exchange Control Act.

I also affirm that I undertake to surrender the EFTC/s to Nations Trust Bank, if I migrate or leave Sri Lanka for employment abroad.

I am aware that the authorized dealer is required to suspend availability of foreign exchange on EFTC if reasonable grounds exist to suspect that unauthorized foreign exchange transactions are being carried out on the EFTC issued to me.

Signature of the Cardholder

I have read and understood the above declaration.

FOR BANK USE ONL	Y								
MAIN CARD NO.]
BACKUP CARD NO.]
We confirm having credited Euro / USD to the above mentioned Travel Card and having verified the following documents:									
Air Ticket]						
Passport]						
Form 1]						
Other documents (sp	oecify)								 -
									 -
DATE		D	D	MM]	Y Y	ΥΥ	Y	
BRANCH / FES Booth	n / Other]

Authorized by (rubber stamp)



Nations Trust Bank PLC - PQ118 256, Srimath Ramanathan Mawatha, Colombo 15

For any inquiries, please call our 24-hour Customer Service Hotline on **+9411 4 414155**

3DC Code	



Nations Trust Bank Travel Card APPLICATION FORM



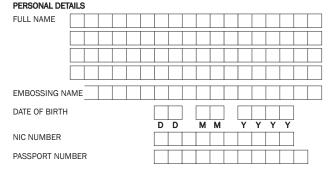
Nations Trust Bank PLC is a licensed commercial bank supervised by the Central Bank of Sri Lanka.

DD/MM/YY

Nations Trust Bank Travel Card APPLICATION FORM

(Please complete this application form in BLOCK LETTERS)

CARD TYPE (Please tick the preferred choice) MASTERCARD USD TRAVEL CARD MASTERCARD EURO TRAVEL CARD AMERICAN EXPRESS USD TRAVEL CARD ARE YOU A CUSTOMER OF NATIONS TRUST BANK YES NO



MOTHER'S MA	IDEN NA	ME		 	•••••	 	 	•••••	 	
ADDRESS										
	ΤĒ									
CORRESPOND	ENCE AD	DRESS								
MOBILE NUMB	ER		[

E-STATEMENTS

Note: only e-Statements will be provided for Travel Card accounts

F-MAIL ADDRESS

(to which e-Statements will be mailed)

COMPANY NAME			
DESIGNATION			
DEPARTMENT			
COMPANY ADDRESS			

TELEPHONE NUMBERS

LAND LINE	
MOBILE NUMBER	

IN CASE OF EMERGENCY

CONTACT NAME	
RELATIONSHIP	
LAND LINE	
MOBILE NUMBER	

VALUE ADDED SERVICES

SMS ALERTS You receive our automatic SMS Alerts Facility free of charge.

MOBILE NUMBER

(which will be used overseas)

I hereby confirm that copies of the Terms and Conditions of Nations Trust Bank PLC applicable to the SMS Alerts Service and the e-Statement Service mentioned above together with details relevant to such services were given and explained to me before signing hereof and I have read and understood the same and agree and consent to be bound thereby.

AMOUNT TO BE LOADED IN USD / EURO



Note: If you load more than 1000 USD/Euro, you are entitled to a complimentary Travel Insurance cover

LOADING METHOD

CASH

PERSONAL ACCOUNT TRANSFER (must be an NTB A/C number)

DETAILS OF TRAVEL

COUNTRY OF TRAVEL

DATE OF DEPARTURE

NO OF DAYS OF TRAVEL

TYPE OF TRAVEL

D	D	м	м	Y	Y	Y	Y
BUS	SINESS]		
HOL	.IDAY]		
EDU	CATION]		
OTH	ER]		
]					

DECLARATION

This declaration is made to Nations Trust Bank PLC:

By signing below, I request that a Nations Trust Bank Travel Card (hereinafter "Travel Card") be issued to me. I agree that my Travel Card may only be used subject to the terms and conditions of the Travel Card Cardmember Agreement and I further agree to accept and be bound by the terms and conditions of the Travel Card Cardmember Agreement. which was given and explained to me before signing below and I have read and understood the details, terms and conditions therein contained and agree and consent to be bound thereby.

I agree to be liable for all charges to the Travel Card issued on my request. I hereby accept any changed, amended, revised and/or newly introduced terms and conditions by Nations Trust Bank PLC from time to time in future, relating to the Travel Card. I agree that the usage of the Travel Card signifies acceptance of all the terms and conditions governing the use of the Travel Card.

I am aware that certain restrictions may apply to cash withdrawals using my Travel Card in Sri Lanka and overseas.

I authorize Nations Trust Bank PLC to share my personal information for marketing and operational matters. I hereby warrant that the above information given in the application is true and correct. I accept that the Travel Card will be issued at the sole discretion of the Bank.

I hereby confirm that copies of the terms and conditions of Nations Trust Bank PLC applicable to the Value added Services which I have applied from Nations Trust Bank PLC with details relevant to such Value added Services were given and explained to me before signing hereof and I have read and understood the details, terms and conditions therein contained and agreed and consent to be bound thereby.

I have read and understood the above declaration.

DD/MM/YY

Signature of the Travel Cardmember

DECLARATION BY THE APPLICANT FOR A FOREIGN TRAVEL CARD (FTC)

To Nations Trust Bank PLC.

1	(Name of the FTC applicant)						
bearing Passport number	hereby authorize						
Nations Trust Bank PLC to c	redit the unutilized foreign currency						
remaining in the FTC to	my foreign currency account						
(A/C No.)/convert in to Sri Lanka rupees and							
credit to my LKR account (A/C No.) upon 90 days							
of my return (delete which is inapplicable).							

I (Name of the FTC applicant) declare that the above information is true and correct.