



goBoB LIMIT ENHANCEMENT FORM

All the field marked * are COMPULSORY

Date: __/__/__

The Branch Manager,

Dear Sir/Madam,

I am goBoB user and would like to enhance my wallet limit up to Nu. 100,000/Month.

My details are as below:

Name with Salutation* (Mr. /Mrs. /Miss /Master)	
Mobile Number*	
CID/Work Permit*	
Date of Birth (dd/mm/yyyy)*	
Present Address*	

(Signature of Applicant)

For Bank/official use only

Created by: (Signature)

Authorized by: (Signature)

Employee ID:

Employee ID:

Date:

Date:

DOCUMENT REQUIRED:

1. Copy of CID/Work Permit