

BANK OF BHUTAN LIMITED

(Incorporated under Companies Act of the Kingdom of Bhutan, 2000)

JOUR TRUSTED DIGITAL WALLET

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* | |

| *************************************** |
|---|
| |

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

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| Bank of Bhutan Limited, Post Box No.102, Thimphu, Bhutan, PABX: +975-2-334333 https://www.bob.bt Toll free contact center at 1095 | | | | |