BCEL.CCT.2025

## BCEL UnionPay Debit Supplementary Card Application Form

To: Banque Pour Le Commerce Exterieur Lao Public,
I would like to apply for UnionPay Debit Supplementary Card with following details:

	Cardholder's	•	con supplementary card with following details.	
Name and S	urname:		Phone No:	
Primary Acc	count:			
Address, Vi	llage:		District:Province:	
2. Supplem	entary Cardh	older's Det	etails:	
• Plea	ase indicate car	d type requ	uired:	
☐ Standard	☐ Carbon	□ Gold	☐ MyWay (DIY card design with picture on the card)  Under the usage conditions of card ☐ Standard ☐ Cardbon ☐ Gold	
Name and S	urname:			_
Name to app	pear on Card: (	WRITEN II	IN CAPITAL LETTER, Max 20 Characters)	
Sav: $\square$ Mala	☐ Female:	Date of Birt	rth:; Nationality:	
			District:Province:	
	•	-	ort  Other Identity Document (Please specify)	
			No: Email: Issued Place: No: Email:	
			Spouse □ Parents □ Children □ Other	
•	tary Card Lin		•	
			<ul> <li>he same account as the primary card tied to but the limit usage is separated</li> </ul>	and
	•		by the Primary Cardholder;	
<ul> <li>Suppleme</li> </ul>	entary cards sha	all have lim	mit usages (exclude the limit of primary card) as below:	
- Gold	card 120,000,	000 LAK; C	Carbon card 120,000,000 LAK; Standard card 80,000,000 LAK and MyWay	card
limit	usage is relied	on the lim	mit of the card type required.	
I confirm	that all inform	nation state	ed herein is true and correct in all respects. I agree and guarantee to use the	card
under the Ba	nk's Condition	s of Use, cu	currency's regulation and laws of Bank of the Lao PDR.	
			At, DateMonthYear	
<u>Sup</u>	plementary C	ardholder'	''s Signature Primary Cardholder's Signature	
Full Name:			Full Name:	
Head of Section			Bank Officer	
		_		

Full Name:....

Full Name: