

**APPLICATION FOR REMOVAL OF INTERNAL SECURITY LIMIT /
AUTHORISATION OF INTERNATIONAL PAYMENT FOR GLOBAL CREDIT CARD**

From,
Name: _____
Address: _____

Phone No.: _____
e-mail id: _____

Date: _____

To,
**The Deputy General Manager
Corporate Office card centre
No.35, 1st Floor, Devanga towers, K.G Road
BANGALORE - 560 009.**

Dear Sir,

**Sub: 1. Removal of Internal Security Limits of my Credit Card.
2. Authorisation of International Payment for my Credit Card.**

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- * I request you to arrange for removal of the Internal Security Limits of my above Credit Card to the full extent of my limit from _____ to _____ (mention dates) or permanently (strike out whichever is not applicable) entirely at my risk and responsibility.
- * I request you to arrange for authorisation of International Payment from my above Credit Card to the extent of Rs. _____ (within the Credit limit of the card) for the period from _____ to _____ (dd/mm/yyyy) or permanently (strike out whichever is not applicable) entirely at my risk and responsibility.

I am aware that by opting for removal of Internal Security Limits and / or Authorisation of International Payment as above I am exposed to the risk of my Credit Card being misutilised to its full limit at Merchant Establishments/ Internet/ ATM and /or at International location if the same is lost from my possession to which I shall own or otherwise.

Yours faithfully,

(Signature of the Cardholder)
Name of the Cardholder:
Mobile Number: _____
(NB: * - Strike out whichever is not applicable)

In case of need please contact

Tel No: Help Desk: 080-22073800/813,
Tollfree helpline:1800 22 5092 & 022-4042 6003
Email: CREDITCARD@SYNDICATEBANK.CO.IN