



The world's local bank

HSBC Flexi Instalment Plan Request Form

Fax this completed form to 04-3906787

Cardholder Name: _____

HSBC Credit Card Number:

| Outlet Name | Transaction Amount (Minimum AED 1000/-) | Date (DD/MM/YY) | Instalment Period Option of 3/6/12/18/24 Months |
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Interest rate applicable on the instalment plan will be 0.99% p.m.
Please remember to fax this form before your HSBC Card Statement date.

Cardholder Declaration:

I would like to apply for the HSBC Flexi Instalment Plan. I am aware that this Plan is available for purchases made by me using my HSBC Card. I have read and agree to be bound by the Terms and Conditions overleaf.

Cardholder Signature: _____ Date: _____

For use by HSBC Card Services:

Request received by _____ Request processed by _____ Date: _____