

**SUBMISSION OF WRITTEN APPEAL**

**TO: APPEALS COMMITTEE**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 1. **Customer’s Details :** | | | | | | | | | | | | | |
| Customer’s Name: | | | | |  | | | | | | | | |
| Acccount Number(s): | | | | | |  | | | | | | | |
| Identity Card No. / Passport No. | | | | | | |  | | | | | | |
| Address : | |  | | | | | | | Email: | |  | | |
| Telephone No. | | | |  | | | | | Fax: No. | |  | | |
| 1. **Appeal Details : (Describe what exactly your appeal concerns ?)** | | | | | | | | | | | | | |
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| **Attached Documents of Evidence:** | | | | | | | | | | | | | |
| The following documents are attached to support my/our appeal (e.g. Bank statement, Correspondence with the Bank, Letter with Bank’s proposal of restructuring, Credit Facility/Security Documents etc) | | | | | | | | | | | | | |
| 1. |  | | | | | | | | 4. |  | | | |
| 2. |  | | | | | | | | 5. |  | | | |
| 3. |  | | | | | | | | 6. |  | | | |
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| Customer’s Signature …………………………. Date…………………… | | | | | | | | | | | | | |
| 1. **For Internal Use** | | | | | | | | | | | | | |
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| Date of Receipt ……………………………. Reference Number ……………………… | | | | | | | | | | | | | |
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| ………………………… …………………………  Name Signature | | | | | | | | | | | | | |