



## EZEE PAY (WPS) CARD APPLICATION FORM

|              |        |
|--------------|--------|
| Company Name | MOL ID |
|--------------|--------|

### EMPLOYEE DETAILS

|                          |              |
|--------------------------|--------------|
| First Name               |              |
| Middle Name              |              |
| Last Name                |              |
| Mother's Maiden Name     |              |
| Date of Birth (DD/MM/YY) |              |
| Emirates ID Number       | Expiry Date  |
| Passport Number          | Expiry Date  |
| Labour Card Number       | Expiry Date  |
| Mobile Number            | Office       |
| Email ID                 | Old Card No. |
| Nationality              | Occupation   |

### CARD VARIANTS (Select Your Card ✓)

|   |   |   |
|---|---|---|
| <br><b>New Card</b><br><input type="checkbox"/> | <br><b>Renewal / Replacement</b><br><input type="checkbox"/> | <br><input type="checkbox"/>   |
| <br><small>HADI EXCHANGE</small>               | <br><small>HADI EXCHANGE</small>                             | <br><small>mastercard.</small> |

### DOCUMENTS ATTACHED

\*Passport Copy     
  \*Visa Copy     
  \*Emirates ID copy     
  \*Labour Card Copy

I/We have read and understood the terms and conditions governing the use of EZEE PAY (WPS) card given overleaf and agree to abide by them. I confirm receipt of my EZEE PAY (WPS) card and declare that I am responsible for the safe keeping of my card and the secret PIN. I accept and agree to be bound by the said terms and conditions and to any modifications made therein from time to time.

|       |        |                        |
|-------|--------|------------------------|
| Date: | Place: | Applicant's Signature: |
|-------|--------|------------------------|




\*Mandatory

**FOR BRANCH USE ONLY**

BRANCH ..... REFERENCE NO. ....

I have verified all the details of customer including signatures of the Applicant and confirm that the customer is eligible for our EZEE PAY (WPS) card. Please issue EZEE PAY (WPS) card with a Cash withdrawal facility at ATM's and purchase facility at Point of Sale, as per the terms and conditions of the issuer.

|       |        |   |
|-------|--------|---|
| Date: | Place: | Manager / Branch In-Charge:<br><b>HADI EXPRESS EXCHANGE</b> |
|-------|--------|---|

|  | ITEM  | FEES (AED)  |
|--|---|---|
|  <p>an Edenred brand</p> <p>Card Validity - 7 years</p> | RAK BANK ATM - Cash Withdrawal  | One Free Per Month  |
|  | Balance Enquiry   | C3-RAK BANK ATM Free  |
|  | Other Bank ATM (UAE) - Balanc Enquiry   | 2 Per Transaction   |
|  | POS Withdrawal from Hadi Exchange   | Free  |
|  | Other Bank ATM (UAE) - Cash Withdrawal  | 2 Per Transaction   |
|  | ATM Outside UAE (GCC) - Cash Withdrawal   | 6 Per Transaction   |
|  | Master Card ATM Withdrawal - Worldwide  | 20/-  |
|  | Master Card Decline   | 5/-   |
|  |   <p>TECHNOLOGIES HADI EXCHANGE</p> <p>Card Validity - 3 years</p> | ATM & POS Tranctions - free at any branches of Hadi Exchange<br>Balance Inquiry - free at any branches of Hadi Exchange |

### CARDHOLDER'S RESPONSIBILITIES

- The Cardholder will sign the ATM Card immediately upon the receipt of the same.
- The ATM Card shall remain in the Cardholder's possession and shall not be handed over to anyone else.
- The Personal Identification Number (PIN) shall remain a secret known only to the cardholder.
- The Cardholder shall immediately notify the C3., customer care or Branches of Hadi Exchange if the ATM Card is lost/ stolen.
- The customer care number is +971 600567772 for C3.
- The customer care number is +971 4 3534802 (Saturday to Thursday, 9.00 am to 9.30 pm) for Hadi Exchange.

### CUSTOMER (CARDHOLDER) DECLARATION

I/We have read and understood the terms and conditions governing the use of EZEE PAY (WPS) card and agree to abide by them. I/We accept and agree to be bound by the said terms and conditions and to any modifications made therein from time to time.

Received EZEE PAY (WPS) Card Number \_\_\_\_\_ from Hadi Express Exchange,  
 \_\_\_\_\_ Branch.

|       |        |                        |
|-------|--------|------------------------|
| Date: | Place: | Applicant's Signature: |
|-------|--------|------------------------|

### EMPLOYER DECLARATION

I/We have read and understood the terms and conditions governing the use of EZEE PAY (WPS) card and agree to abide by them. I/We accept and agree to be bound by the said terms and conditions and to any modifications made therein from time to time.

|       |        |                       |
|-------|--------|-----------------------|
| Date: | Place: | Authorized Signatory: |
|-------|--------|-----------------------|