

Finance House Credit Card Number:

Balance Transfer Request:

Total Balance Transfer amount to be transferred: AED

Details of other Bank Credit Cards

No.	Credit Card Details	Card Expiry (mm/yy)	Issuing Bank Name	Amount to be Transferred (AED)

Minimum amount due that I agree to pay on my Finance House Credit Card is (tick one):

☐ 2% ☐ 3% ☐ 4% ☐ 5%

I hereby acknowledge that the Terms and Conditions of the CREDIT CARD AND SULFAH APPLICATION FORM are applicable, and that this document forms an integral part of "CREDIT CARD AND SULFAH APPLICATION FORM."

Sincerely,

Customer Name:

Signature:

Mobile Number: -