



## Card Limit Revision Form

Date: \_\_\_\_\_

|                 |   |
|-----------------|---|
| Customer Name*: | <input style="width: 100%;" type="text"/> |
| Company Name:   | <input style="width: 100%;" type="text"/> |
| CNIC*:          | <input style="width: 100%;" type="text"/> |
| Telephone no*:  | <input style="width: 100%;" type="text"/> |
| Email:          | <input style="width: 100%;" type="text"/> |
| Card No*:       | <input style="width: 100%;" type="text"/> |
| Name on card*:  | <input style="width: 100%;" type="text"/> |
| Vehicle No:     | <input style="width: 100%;" type="text"/> |

Quantity (Liters)   
  Amount (Rupees)

| Existing Limit | Requirement     | Products |        |      |      | For office use only |
|----------------|-----------------|----------|--------|------|------|---------------------|
|                |                 | Petrol   | Diesel | HOBC | Lube |                     |
| Limits         | Yearly          |          |        |      |      |                     |
|                | Monthly         |          |        |      |      |                     |
|                | Weekly          |          |        |      |      |                     |
|                | Daily           |          |        |      |      |                     |
|                | Per Trans limit |          |        |      |      |                     |
| Revised Limit  | Requirement     | Products |        |      |      |                     |
|                |                 | Petrol   | Diesel | HOBC | Lube |                     |
| Limits         | Yearly          |          |        |      |      |                     |
|                | Monthly         |          |        |      |      |                     |
|                | Weekly          |          |        |      |      |                     |
|                | Daily           |          |        |      |      |                     |
|                | Per Trans limit |          |        |      |      |                     |

\_\_\_\_\_ Name

\_\_\_\_\_ \*Authorized Signatory & Company Stamp

**Note:** In case of multiple cards, please attach list (card number, name of card and revised limit details) on your company's letterhead with seal and authorized signature.

