

**Form No: 5**

**CONFIDENTIAL**

**Name of the Bank .....**

General Manager  
Credit Information Bureau  
Address \_\_\_\_\_  
\_\_\_\_\_

**OFFICERS AUTHORISED TO REQUEST CREDIT INFORMATION FROM THE BUREAU**

I give below the full names, designations and specimen signatures of officers of this bank, who have been authorised to sign requests for credit information from the Credit Information Bureau.

<b>Full Name</b>	<b>Designation</b>	<b>Contact Telephone no.</b>	<b>Specimen signature</b>

.....  
**Signature of the Chief Executive**