

Liability Letter Request Form

Please ensure that all fields are mandatorily filled by you in CAPITAL letters before signing.

Date	_(DD)/_(MM)/(YYYY)
CIF number	
Customer full name	
Emirates ID number	
Emirates ID expiry	_(DD)/_(MM)/(YYYY)
Mobile number	
Office number	
Email address	
Loan buy out Personal usage Leaving the cou	
c) Loan amount offered	d by other finance company/or bank?
d) Rate of interest offer	red by other finance company/or bank?
e) Comments (if any):	
SIGN	HERE

Please send completed and signed form to customercare@deem.io

Signature over printed name