₩ (UOB 大华银行

UNITED OVERSEAS BANK LIMITED ("UOB")

To: CMOC ESERVICES FORMS PROCESSING TEAM, BRAS BASAH POST OFFICE, PO BOX 106, SINGAPORE 911804

UOB 1935000

Rea. No

Date Unite

ank Limited C



ATM CARD APPLICATION FORM

(Corporation/Sole Proprietorship/Limited Liability Partnership/ Partnership/Society/Association/Club/Management Corporation)

PARTICULARS OF	APPLICANT																					
Name Of Applicant	L																					
	Į																					
Business Registrati	ion Number			Ι			1						1			1		 	 			
Account Number	-	SGD		Ī	<u> </u>	-	i	<u> </u>	<u> </u>	-	<u> </u>	<u>.</u>	İ	-	1		<u> </u>					
APPOINTMENT OF	ATM CARDHOLDE	R(S) ((* Please	e dele	te whe	re inap	oplica	ble.)														
We appoint the per	son(s) named below	to be th	he autho	orised		TM care	dholde	er(s):	`ardhı		4						Card					
Name (as in NRIC/Passport*)					+	Cardholder 1								Cardholder 2								
(Dr/Mr/Miss/Mrs/Mdm*)						-	l															
Preferred name (19 characters including spaces) (optional)						+=									+							
						+																
NRIC/FIN/Passport No.*						+																
Preferred Language For ATM Instructions [Please tick one only for each ATM cardholder.							English								English Chinese							
Default language is 'E	inglish'.]			- 4-																		
(a) Fast Cash Depo	M CARD SERVICE(osit, NETS Purchase,					um of 4	servi	ce opt	tions	only fo	or eac										(1BIZN)	
ATM Funds Transfer, Uniflash Withdrawal						(1BIZN)								(1812N) (2BIZN)								
<u>Withdrawal Limits</u> Daily ATM Limit S\$3,000 default S\$50,000 maximum						(2BIZN) S\$								S\$. 00								
Daily NETS Limit S\$2,000 default S\$2,000 maximum						S\$. 00								S\$. 00								
Daily Uniflash Limit S\$10,000 default S\$10,000 maximum						S\$00								S\$00								
Monthly Card Limit S\$10,000 default S\$100,000 maximum						S\$	\$	Ī	ĪT	. 0	0			S\$00								
Note: If you prefer a customisation of limits, please indicate your limit. Otherwise the default limit will apply																						
(b) <u>CashCard Top-</u> Transaction Limi	Up At EFTPOS & Ca it S\$50	shCarc	Refund	1	_		-	-	_	-	-	_	_		_	_	-	-	_	-		
Daily Maximum I	Limit S\$3,000										(1	1ACO	RP8)							(1AC	CORP8)	
Monthly Maximu Please note that cus	m Limit S\$5,000 stomisation of limits is not a																					
	Up At EFTPOS / ATM	M & Ca	ashCard		d	+								1								
Daily Maximum I	<u>ATM</u> Limit S\$3,000		FTPOS \$2,000								(1	1ACTC	OP1)							(1A0	CTOP1)	
Monthly Maximu		-	\$\$2,000 \$\$4,000																			
(d) Statement Requ	Jest					+	\square				(1	1ACO	RP6)		\square					(1AC	CORP6)	
(e) Balance Enquiry						+					(1	1ACO	RP7)							(1A(CORP7)	
(C) Dalarioo Eriquin	<u>r</u>										ι.		× .,							(JOIN 1,	
	e						_	_							_							
AUTHORISATION &																						
 apply for the use of 	ATM Services on the t																					
	ve obtained the UOB rein and any amendme				Governir	ıg Ассо	ounts a	nd Ser	rvices	at uob	.com.	.sg and	1 hav	e read,	unders	tood a	nd agr	eed to	be bou	und		
 confirm that I/we had 	ave read and understoo	od the te	erms and	d condit	ions app	plicable	to eac	h of th	ie serv	ices th	nat I/w	/e have	e app	lied for,	and ag	greed t	o be br	ound b	y such	I		
	ns and any amendmen f the ATM Cardholder r				ised to c	operate	and ut	ilise ar	nv of tr	he serv	vices	nrovide	ed to	the App	olicant t ⁱ	hrougt	h the A	тм Са	rd and	that		
the transaction limit	t conferred on the ATM	I Cardho	older as s	set out	in this a	pplication	ion sha	all apply								•						
limit, the default maximum limit stated herein shall apply to the ATM Cardholder's limit. authorise the Bank to issue the ATM Card(s) and PIN(s) to the ATM Cardholder, where applicable. 																						
confirm that, in the	event of any change of	f the aut	thorised /	ATM C						uthority	/ of the	e relev	ant A	TM Car	rdholde	r throu	gh the	submi	ssion	of a		
	or relevant maintenan to debit all subscription				nd servi	ce char	ges in	conne	ection v	with thi:	is appl	lication	1 and	/or use	of the A	ATM Se	ervices	and A	TM Ca	ard		
to the Applicant's ac	ccount(s). Cardholder(s) to ackno	anhelw	receint c	of the Δ	TM Car	d(e) and		n) and	to agr	ne to h	ne hoi	ind hy	the F	Pank's t	orms ai	nd con	ditions	for the	Sir LISP	on		
behalf of the Applica	ant.	0	·			()	``	,	0			,								UII		
	and hold harmless the y sustain, incur or be lia			-							-									nd		
ATM Card.																100	uic	W 02.	noce .	110		
	information provided he rue copy of the Applica						f my/oι	Jr knov	wledge	e as at	the d	ate of	this a	pplicati	on.							
				10																		
						_			_												_	
Authorised Signature Name:	1									uthoris ame:	ed Sig	gnature	е									
Date:		Date:																				
FOR BANK USE ON Attended By:	Received By:	Sign	ature Ve	rified B	y: P	rocess	ed By:		Ar	pprove	ed By:		F	Remark	s:							
					-		-															
Name and Signature	Name and Signature	Nam	e and Sig	nature	N	Name an	nd Sign [.]	ature	Na	ame an	nd Sigr	nature	_									
Date:	Date:	Date	-			Date:	5			ate:												