



**UOB CREDIT/ DEBIT CARD ACTIVATION  
& ENABLING/DISABLING OF MAGNETIC STRIPE FOR OVERSEAS CARD USE FORM**

Please complete all fields before mailing back to us using this Business Reply Envelope.  
Please ensure that any amendment made is countersigned.

**PART 1: YOUR PARTICULARS**

|   |                                |
|---|--------------------------------|
| Name (Full name as per NRIC/Passport):<br>_____ | NRIC/Passport Number:<br>_____ |
|---|--------------------------------|

**PART 2: ACTIVATION OF UOB CREDIT/DEBIT CARDS**

Please state the 15/16-digit card number of the card(s) you wish to activate<sup>1</sup>  
I hereby instruct the bank to activate the following UOB card accounts:

|    |                                 |
|----|---------------------------------|
| a. | _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ |
| b. | _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ |
| c. | _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ |
| d. | _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ |

<sup>1</sup> Principal Cardmember is authorised to activate his/her Principal and Supplementary card accounts under his/her Principal card account(s).  
Supplementary Cardmember is only allowed to activate his/her own Supplementary credit cards.

**PART 3: SELECT MAGNETIC STRIPE SETTINGS OF YOUR UOB CREDIT/DEBIT CARD FOR OVERSEAS CARD USE**

Please state the 15/16-digit card number of the card(s) you wish to enable/disable<sup>1</sup> for overseas card use  
I hereby instruct the Bank to effect the magnetic stripe settings for the following UOB card accounts for overseas card use:

| Card Number                         | Magnetic Stripe Settings<br>for Overseas Card Use<br>(Delete where applicable) | From<br>(DD/MM/YY) <sup>2</sup> | Till<br>(DD/MM/YY) <sup>2</sup> | Countries of Travel<br>(Optional) <sup>3</sup> |
|-------------------------------------|--|---------------------------------|---------------------------------|--|
| a.  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ | Enable / Disable   | _____                           | _____                           | _____  |
| b.  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ | Enable / Disable   | _____                           | _____                           | _____  |
| c.  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ | Enable / Disable   | _____                           | _____                           | _____  |
| d.  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ | Enable / Disable   | _____                           | _____                           | _____  |

<sup>1</sup> Each Principal and Supplementary Cardmembers must enable/disable the magnetic stripe settings of his/her card(s) for overseas card use individually.  
<sup>2</sup> Please leave blank if you wish to enable your card perpetually for overseas card use. Selection of period is only applicable if you are enabling the magnetic stripe on your card.  
<sup>3</sup> Please indicate countries of travel if you have specified a period in which the magnetic stripe on your card will be enabled for overseas card use.

**PART 4: DECLARATION AND AGREEMENT**

- 1 I hereby confirm that I have read and understood the Terms and Conditions stated herein and agree to be bound by them.
- I hereby agree and represent to the Bank that the particulars and information furnished by me in all documents and in this form are true and accurate, and at the time of this application, I am not an undischarged bankrupt and there has been no statutory demand served on me nor legal proceedings commenced against me.
- 2 I understand that incomplete and/or erroneous forms will not be processed and the status of the cards stated herein will remain un-activated and (where applicable) the magnetic stripe settings for overseas card use will remain unchanged.
- 3 I consent and authorise the Bank to communicate with me with respect to this instruction by mail or by any other means the Bank may deem appropriate.
- 4 I agree that the Principal Cardmember is responsible for all liabilities (including liabilities incurred by all Supplementary cards, annual fees or any other fees/charges) and each Supplementary Cardmember is responsible for his/her liabilities incurred in respect of his/her card.
- 5 In order to effect my instruction, should the signature on this form differ from the record registered under my card account, I agree to allow the Bank to verify my signature against the signature of any other account that I may hold with the Bank and the Bank is entitled to reject the application without assigning reason or notice to me.
- 6 I unconditionally agree to be bound by the Terms and Conditions of the UOB Cardmember Agreement once the card(s) stated herein is/are successfully activated and (where applicable) the magnetic stripe settings on the card(s) stated herein is/are successfully changed.

|                               |            |
|-------------------------------|------------|
| Signature of Cardmember _____ | Date _____ |
|-------------------------------|------------|

**FOR BANK USE ONLY**

|  |   |                                       |   |
|--|---|---------------------------------------|---|
| Verified By<br>_____<br>Signature & Name | Processed By<br>_____<br>Signature & Name | Input By<br>_____<br>Signature & Name | Checked By<br>_____<br>Signature & Name |
|--|---|---------------------------------------|---|

Fold along dotted line

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paid by  
addressee. For  
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**BUSINESS REPLY SERVICE  
PERMIT NO. 08567**



**UNITED OVERSEAS BANK LIMITED  
JOB CARD CENTRE**  
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