WOB

*CC-366(7.16)



PLAPFMSG001

UOB CREDIT CARDS AND CASHPLUS CREDIT LIMIT REVIEW APPLICATION FORM

Please mail the completed form together with your latest income documents to us. Please allow two weeks for application processing. Applications not accompanied by required documents or with incomplete information will experience a delay in processing.

YOUR PARTICULARS																			
Name as in NRIC/Passport (underline surname):																			
NRIC/Passport no.:				N	lational	ity:													
NRIC/Passport No. Issue Date:																			
Date of Birth (DDMMYYYY):				Sing	gapore l	PR:] Yes	5		No								
Company name:																			
Length of employment: Years	Μ	onths		Sel	f-emplo	oyed:] Ye	S		No								
Occupation (please tick one box only) Mandatory Account Assistant Operation Assistant Government Officer Service Industry Staff Manager Accountant/Financial Control Insurance Agent/Financial Planner	Consu Engin Oller			Sales	eting Exe Assistan Proprieto	t	er				or/M Exec	anag			ssistar or/Chc			\ssista	nt
PREFERRED CREDIT LIMIT																			
☑ Yes! I would like to increase the credit limit on my	(please c	omple	ete wh	ere a	pplicabl	e):													
UOB Credit Card no.: Please indicate any one of your UOB Credit Card numbers. The the aggregate credit limit in respect of all your UOB Credit Card		increas	se refer	s to	UOB C	ashPl	us no	D.:											
Please tick one of the options below:	Please								limit	on r	ny UC	DB C	ashi	Plus C	R				
Preferred UOB Credit Card limit: S\$ (Minimum Credit Limit = S\$2,000)						ferrec	I UO edit Lir	B Co mit = S	ishPl \$\$2,00	us lin	nit:	S\$							
I/We understand that the Bank has the right to grant me/us a credit limit that the Bank has the right to assign the credit limit(s) at its discretion ar the nearest \$\$500. I/We understand that any credit limit increase will no	nd I/We herel	oy confiri	m that I/	/We agi	ree and cor	nsent to	any cr	redit l	imit as	signed	d by t	he Bar	nk. Pref	errec					
INCOME DOCUMENTS REQUIRED																			
 For Salaried Employees Latest Income Tax Notice of Assessment¹ and Computerised Payslip; OR Latest 3 months' Computerised Payslip; OR Latest 12 months' CPF Contribution History Statement For Foreigners: In addition to the above documents, properties of the second statement and the second statement and the second statement and the second statement submission, the maximum of 2 For CPF Contribution History Statement submission, the maximum of the second statement submission. 	nt² Ilease pro le above a rour SingPas	Lates States Lates vide a docume	t 12 m ment ² ; t Incor copy ents, p s PIN. TI	onths ; OR me Ta of you please he serv	e also pr ice is free.	ort ar ovide	tion sessind En a cop to htt	men nplo py o :ps://i	t ¹ yme i f you nytax	n t Pa r NRI iras.g	• Lo I SS (IC. ov.sg	atest with g for m	at lec	me T ast a	Tax N 6 mor	iths v	valio	lity).	sment ¹
together with your CPF Contribution History Statement if your mo	nthly salary	is more	than S	\$6,800															
 By signing this Application Form, I/We, the Applicants: represent and warrant that all information and documents provided by hereby authorise UOB (the "Bank") to obtain and verify any information with any party without reference to me/us. iii. confirm and agree that if this application has been sent by email, the Bc iv. understand that the credit limit of all the Supplementary Card(s) under t otherwise informed by the Bank. understand that any credit limit increase will not be applicable to existir hereby consent that the Bank may at any time without liability to me/us, (including without limitation to the Consumer Credit Bureau, the Bank to will, hereby confirm that I/We have read, understood and agree to be bound wiii, further understand that the terms and conditions contained in the UOB 	about me/us ink is authoris he relevant Si ng Supplemer use and/or d pranches word I by the terms	at the Ba sed to reli- upplement itary Card isclose and dwide and and cond	ank's disc y and ac ntary Car dholder(ny inforn nd its off ditions s	cretion of rdholde s) not in nation r ficers, ag	and further on the emai r(s) of the P adicated on elating to m gents, corre in the revers	iled copy trincipal this app ne/us or esponde se side o	y witho Cardho licatio any of nts and f this A	out the older on forr my/o d inde Applic	e origir will be n, if an ur acco spende ation F	al. adjust unts w nt con orm.	ed ac vith th tracte	ccordir ne Ban ors).	ig to thi k for pu	e opt irposi	ions inc es relat	dicated	d in th	is form,	unless
		ardholder 1					Name of Supplementary Cardholder 2 NRIC no.:												
Principal Cardholder's Signature and	Signature	e and [M/YY)	Sign	natu	re ar	nd Da	ite (DD/N	M/Y	Ύ)								
Date (DD/MM/YY)	F				or Bank Use								Sou	rce	Code	: 900	004	(CC), 5	GC (CP)
				CL: Fr To								,	A1:						
All information is correct at time of print. UOB Cards and Payments, United Overseas Bank Limited Co. Reg. No. 1935	00026Z.				Reviewe	ed By:						Ap	prov	ed E	Зу:				

Terms & Conditions:

- 1. The Bank has the right to grant you a credit limit that is lower than the preferred credit limit indicated in this application, particularly if you have any unsecured credit facility with the Bank and/or income documents which reflect a lower earned income. Adjustment to credit limit shall be rounded up to the nearest \$\$500 and where no preferred credit limit is stated above, the Bank may adjust the credit limit in its discretion. If your earned income is not less than \$\$30,000 p.a., the aggregate credit limit of your UOB Credit Card(s) and UOB CashPlus can be (a) up to 4 times your monthly income; or (b) a higher multiplier of your monthly income at the Bank's discretion and as may be permitted under law.
- 2. Any approved aggregate credit limit may be apportioned to your Credit Card(s) and/or CashPlus at the Bank's discretion.
- 3. Any approved credit limit increase for your Credit Card(s) will be assigned to all your current principal and supplementary Credit Card(s), save for existing supplementary cardholder(s) not included in this application, and you shall abide by such approved credit limit.
- 4. If the credit limit for your Credit Card(s) and/or CashPlus is reduced pursuant to the Bank's review and the current outstanding balance for such Credit Card(s) and/or CashPlus exceeds the revised credit limit, you must immediately pay the Bank such excess in the manner directed by the Bank in its discretion.
- 5. For the Bank to assess this application, this application (duly completed and signed) and your latest and complete income documents must be submitted to the Bank within 3 weeks of the date of this application. Any late or incomplete submission may be declined without notification to you.
- 6. The acceptance and approval of this application is at the sole discretion of the Bank whose decision is final, conclusive and binding. The Bank shall not be required to give any reason or prior notice or be liable to any person in connection with any acceptance or rejection of this application and no appeals or correspondences will be entertained.
- 7. The Bank reserves the right to request for additional documents for the purpose of assessing your application for credit limit review.
- 8. If you have been granted a temporary credit limit increase, any change to your credit limit on your Credit Card(s) and/or CashPlus will take effect only after the temporary credit limit increase has expired.
- 9. Where this application is submitted by email, the Bank is authorised to rely and act upon on the emailed copy without the original.
- 10. This application supersedes any prior instruction on credit limit adjustment (if any) from you.

For posting in Singapore only.

BUSINESS REPLY SERVICE PERMIT NO. 02051

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UNITED OVERSEAS BANK LIMITED UOB CARD CENTRE ROBINSON ROAD P.O. BOX 1688 SINGAPORE 903338