

SERVICE REQUEST FORM FOR BIZ-XPRESS CARD (BUSINESS DEBIT CARD)

1. Customer Details

Company Name: _____

2. Request Details

Request Type (Please tick ☒ where applicable):

- ☐ New Card Issuance ☐ Card Replacement (Reason: _____)
☐ Link Account Number ☐ Forget PIN
☐ Activate CPIN ☐ Overseas Transactions

CARDHOLDER 1

Card Type

- ☐ Full Access High Limit (ATM Deposit & Withdrawal/Retail & Online Purchases)
☐ Deposit only

Card No. (For Bank Use Only)

Cardholder Full Name

I.C./Passport No.

Mobile No. (to receive One-Time Password)
 *Include country code. i.e. "+601xxxxxxx"

Email Address

Account Linkage (Please tick ☒ ONE only)

- ☐ All accounts ☐ Account number(s) as specified below:

Applicable to all business current accounts and savings accounts under the same business entity & customer information records (CIF) with the Bank. Each card can link up to six (6) accounts only.

No.	Account Number	Primary
1		<input type="checkbox"/>
2		<input type="checkbox"/>
3		<input type="checkbox"/>
4		<input type="checkbox"/>
5		<input type="checkbox"/>
6		<input type="checkbox"/>

Enabling Online Purchase / Card-Not-Present Transaction

- ☐ Yes ☐ No

***Note:** For enhanced security measures, customers are required to send in official requests and signed by the Authorised Signatories for any subsequent changes*

CARDHOLDER 2

Card Type

- ☐ Full Access High Limit (ATM Deposit & Withdrawal/Retail & Online Purchases)
☐ Deposit only

Card No. (For Bank Use Only)

Cardholder Full Name

I.C./Passport No.

Mobile No. (to receive One-Time Password)
 *Include country code. i.e. "+601xxxxxxx"

Email Address

Account Linkage (Please tick ☒ ONE only)

- ☐ All accounts ☐ Account number(s) as specified below:

Applicable to all business current accounts and savings accounts under the same business entity & customer information records (CIF) with the Bank. Each card can link up to six (6) accounts only.

No.	Account Number	Primary
1		<input type="checkbox"/>
2		<input type="checkbox"/>
3		<input type="checkbox"/>
4		<input type="checkbox"/>
5		<input type="checkbox"/>
6		<input type="checkbox"/>

Enabling Online Purchase / Card-Not-Present Transaction

- ☐ Yes ☐ No

***Note:** For enhanced security measures, customers are required to send in official requests and signed by the Authorised Signatories for any subsequent changes*

Declaration				
I / We declare that all information provided herein are correct.				
Authorised Signatories 1	Authorised Signatories 2	Authorised Signatories 3	Company Seal	
Signature:	Signature:	Signature:		
Name:	Name:	Name:		
I.C./Passport No.:	I.C./Passport No.:	I.C./Passport No.:		
Date:	Date:	Date:		
Card Acknowledgement				
I / We hereby acknowledge the receipt of Debit Card.				
Cardholder 1		Cardholder 2		
Signature:		Signature:		
Name:		Name:		
Date:		Date:		
For Bank Use Only				
For Branch Use			For Processing Unit / Relevant Department Use	
Received by	Signature Witness by	Signature Verified by	Input Processed by	Approved by
Name:	Name:	Name:	Name:	Name:
Signature:	Signature:	Signature:	Signature:	Signature: