

CREDIT CARD/CASHLINE REVOLVING LOAN – CUSTOMER INFORMATION CHANGE FORM

To: DBS Bank (Hong Kong) Limited
Card Servicing (Fax No. 2572 6922)

Handled by: DBS _____ Branch¹

Customer Name : _____ Identification No. : _____

Account No. (Please fill-in the related account no(s) and marked “✓” in the following appropriate box(es))

Card Number : _____ Cashline Revolving Loan Number : _____

Services Requested

1. Credit Card

- Upgrade to Gold Card / Platinum Card (Please submit a copy of your latest income proof) (only applicable to credit card)
- | | | |
|---|---|---|
| <input type="checkbox"/> DBS VISA Platinum | <input type="checkbox"/> DBS Platinum MasterCard | <input type="checkbox"/> DBS VISA Gold |
| <input type="checkbox"/> Manulife Platinum MasterCard | <input type="checkbox"/> Manulife Platinum MasterCard (with MediPlus) | <input type="checkbox"/> Manulife VISA Gold |
| <input type="checkbox"/> Manulife VISA Gold (with MediPlus) | <input type="checkbox"/> Cable Power VISA Gold | <input type="checkbox"/> Pay Less VISA Gold |
| <input type="checkbox"/> COMPASS VISA Platinum | <input type="checkbox"/> 3Everyday COMPASS Platinum | <input type="checkbox"/> CV+ |
- Credit Limit Increase Request (Please submit a copy of your latest income proof)
- Permanent Temporary (will be effective after a few working days)

Until _____

Reason _____ Amount _____

2. Credit Card / Cashline Revolving Loan

- Card Replacement
- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Captured Card | <input type="checkbox"/> Damaged Magnetic Strip | <input type="checkbox"/> Damaged Chip |
|--|---|---------------------------------------|
- Reissue Personal Identification Number (PIN)
- Reissue Telephone Identification Number (TIN)
- Request for brand new DBS Treasures Platinum Card (Only applicable to existing DBS Treasures Platinum Cardholders)
- Cancel autopay for Credit Card/Cashline Revolving Loan Account Payment (Please use other payment methods. e.g. cash, cheque payment or PPS)

Note : If you want to cancel the Merchant Direct Debit Authorisation arrangement on your credit card account, e.g. mobile service fee, insurance fee, please inform the relevant merchant(s) about the cancellation directly.

3. Credit Card/Cashline Revolving Loan

- Change Correspondence Address (Neither any address outside of HK nor mailbox should be used as customer's correspondence address) :

Residence Tel.: _____ Office Tel.: _____ Mobile Phone/Pager No.²: _____

Others: _____

Please confirm that your instructions have been clearly, accurately and completely set out in this form before signing it.

Customer Signature³

Date

For Bank Use Only		
Branch		Card Svg
S.V./I.D.V. By	App. By	S.V. By
Name & Sig. No.	Name & Sig. No.	

¹ To be filled in by staff.

² Please note that the Bank will send the Verified by Visa/MasterCard SecureCode one-time password to you via the above mobile phone number for you to conduct online credit card transactions which require identity authentication.

³ This signature must agree with the specimen signature deposited with the Bank.