

DBS iBanking eStatement/eAdvice Service Maintenance Form (For Single and Joint Account)

- Notes: 1. For Customers of DBS Private Bank and DBS Treasures Private Client, as well as DBS Treasures Customers with a Wealth Management Account.
2. The eStatement/eAdvice Service is only available to single/ joint accounts which can be operated by each joint accountholder solely.
3. Only accountholders who have registered to use DBS iBanking with the relevant Wealth Management Account(s) included in their DBS iBanking portfolios will be able to access the eStatement/eAdvice Service.
4. In Hong Kong, DBS Private Bank is the private banking division of DBS Bank (Hong Kong) Limited.

星展銀行(香港)有限公司

To: DBS Bank (Hong Kong) Limited ("the Bank" which expression includes its successors and assigns) Branch _____

此表格備有中文及英文版。如你選用此表格（英文版）提交申請，即表示你同意選用**英文版**之表格及明白表格內之全部內容。

This form is available in both English & Chinese versions. By completing this form, you agree to use this **English version** and confirm that you understand all its contents set out below.

Please complete in BLOCK LETTERS, put a where applicable and cross out any unused spaces. Please place the form into the drop-in box at any of our branches or mail it to DBS Bank (Hong Kong) Limited, G.P.O. Box 400. Your request will normally be processed in 4 business days upon our receipt of the duly completed form.

Customer Details	
Customer Name:	Contact Tel. No.:
Identification Document Type: <input type="checkbox"/> HKID Card <input type="checkbox"/> Passport	Identification Document Number:
For joint account customers, please provide the Joint Account Number (<i>for signature verification purpose</i>): <input type="checkbox"/> DBS Private Bank: _____ <input type="checkbox"/> DBS Treasures Private Client: _____ <input type="checkbox"/> Wealth Management Accounts under the DBS Treasures Account: _____	

Instruction
Please choose one of the following ways to receive Statement and Advice: <input type="checkbox"/> e-Copy only <input type="checkbox"/> e-Copy and hardcopy
Notes (Applicable to joint account customers): <ul style="list-style-type: none">The amendment(s) above will apply to DBS iBanking service(s) for all joint accountholders.You will receive an email notification when your eStatement/ eAdvice is available.This form must be signed by all joint accountholders.

Customer's Declaration
I/We acknowledge that I/we understand and accept the following risks associated with the use of the eStatement/eAdvice Service: (a) appropriate computer equipment and software, internet access, the username and password for accessing DBS iBanking and an email address and/or a mobile number designated to receive notifications are required for using the eStatement/ eAdvice Service; (b) internet and email services may be subject to certain information technology risks and disruption; (c) the eStatement /eAdvice Service is currently free of charge. The Bank reserves the right to charge a fee for such service from time to time upon giving me/us prior notice; (d) each joint accountholder who has provided the Bank with the required contact information will receive an email and/or SMS notification (as the case may be) from the Bank when the eStatement/eAdvice is available online. I/We note that notifications of eStatement/eAdvice will be delivered to each joint accountholder's email address (if by email) or mobile number (if by SMS) previously provided to the Bank, and all joint accountholders should check their own email addresses and/or mobile numbers regularly for such notification; and (e) I/we shall be required to pay a charge as set out in the Bank Charges Schedule for obtaining a hard copy of any statement/advice that is no longer available for access and downloading through DBS iBanking.
I/We confirm that the information provided by me/us is true, correct and complete in all aspects and I/we hereby authorize the Bank to process my/our above instruction. I/We understand that this authorization is subject to the Terms and Conditions for DBS iBanking as amended from time to time and I/we agree to be bound by such terms and conditions. This authorization shall continue in full force and effect until the Bank shall have received and had reasonable opportunity to act on my/our cancellation instruction in writing provided that the Bank may terminate this arrangement at any time by written notice to me/us for any reason whatsoever as the Bank may deem appropriate. The Bank may refuse to effect such instruction on any reasonable ground without any liability and shall not be obliged to ascertain the accuracy of the account numbers mentioned above nor to ensure that any such account number corresponds with the account name set out beside such account number.

I/We agree that all information provided in this form or that arises from the relationship with the Bank (or other DBS Group companies) shall be subject to the applicable Data Policy Notice and other communications to customer concerning customer data from time to time issued by the Bank. A copy of such policies or other communications is available on request at any branch of the Bank or from the Bank's website (www.dbs.com/hk).

Acknowledgement of Use of My/Our Personal Data in Direct Marketing

I/We understand that the Bank intends to use my/our personal data in direct marketing and cannot do so without my/our consent. I/We have previously selected whether or not to receive direct marketing contact or information and I/we confirm that there is no change to my/our existing choice and all information provided in this application form shall be used in accordance with such choice. I/We understand that if I/we wish to change my/our existing choice, I/we may do so at any time and without charge by completing an opt-out form and returning it to the Bank.

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

Signature(s) of Joint Accountholder(s)

Date

(The signature must agree with the specimen signature filed with the Bank.)

For Bank Use Only

Branch

Attended By
(Signature, Name & Date)

Initial the action(s) taken:

Approved By
(Signature with No., Name & Date)

S.V.

(Mark name & date if different from the attending staff.)

Account Processing Banking

S.V.

Input

Approved