



CHANGE OF ADDRESS / CONTACT DETAILS FORM

To: Channel Operations Centre Robinson Road P O Box 1282 Singapore 902532

Personal

YOUR PARTICULARS (Form is for 1 customer only, please submit a separate form for additional request)

| | |
|---|--|
| Name (as in NRIC/Passport) (Dr/Mr/Miss/Mrs/Mdm*) | |
| NRIC/Passport No./FIN* | |

YOUR NEW MAILING ADDRESS

New Mailing Address (For above named customer only)

| | |
|-----------------|-------------|
| Block/House No. | Unit No. |
| Street | Postal Code |
| Country | |

New Residential Address (IF DIFFERENT FROM ABOVE)

| | |
|-----------------|-------------|
| Block/House No. | Unit No. |
| Street | Postal Code |
| Country | |

YOUR NEW CONTACT NUMBER(S)

| | |
|-------------------------|--------------------------|
| Home Tel No. | Overseas/Office* Tel No. |
| Mobile ¹ No. | Email Address |

Note 1: The mobile phone number will be used for the purpose of SMS-OTP for UOB Personal Internet Banking and UOB Mobile Services, UniAlerts and other transaction alert notifications. For more information on applicable transaction alerts notifications, please visit www.UOB.com.sg.

PART (A) UPDATING ACCOUNT(S) [Please tick only 1 box, where applicable]

- PLEASE UPDATE **ALL** my account(s) Please note that address for your Individual Single name account(s) & Joint-Or account(s) will be updated
- PLEASE UPDATE **ONLY** my account(s) below:

| Account Type ² | Account Number |
|---------------------------|----------------|
| | |
| | |
| | |
| | |

Note 2: Account Type: Deposit / Loan / Credit Card / Unit Trust / Others (please specify):

I agree that the Bank may verify my signature(s) below against the same in the Bank's records and may effect the change of address for all my accounts even though the signature(s) on record for one account may differ from that/those on record for another account.

Account Holder / Authorised Person Signature** _____ Date _____
 For Authorised persons, please provide Name: _____ Passport / NRIC Number: _____

**Thumbprints (if any) must be affixed in the presence of a bank officer. Please bring your NRIC/Passport for identification purpose.

PART (B) UPDATE OF JOINT ACCOUNT(S) REQUIRING ALL JOINT ACCOUNT HOLDERS TO SIGN

- PLEASE UPDATE OUR Joint accounts below
- Account Type (Please circle where applicable): Deposit / Loan / Unit Trust / Others (please specify) _____
 Account Number: _____
 Name of Account Holders: _____
 - Account Type (Please circle where applicable): Deposit / Loan / Unit Trust / Others (please specify) _____
 Account Number: _____
 Name of Account Holders: _____

We agree that the Bank may verify my signatures below against the same in the Bank's records and may effect the change of address for all our accounts even though the signatures on record for one account may differ from that/those on record for another account.

Account Holder 1 / Authorised Person Name & Signature** _____ Date _____
 Authorised Persons Passport / NRIC Number: _____

Account Holder 2 / Authorised Person Name & Signature** _____ Date _____
 Authorised Persons Passport / NRIC Number: _____

Account Holder 3 / Authorised Person Name & Signature** _____ Date _____
 Authorised Persons Passport / NRIC Number: _____

Account Holder 4 / Authorised Person Name & Signature** _____ Date _____
 Authorised Persons Passport / NRIC Number: _____

**Thumbprints (if any) must be affixed in the presence of a bank officer. Please bring your NRIC/Passport for identification purposes.

FOR BANK USE ONLY

| | | |
|------------------|--------------------------|------------------|
| Attended By | Signature(s) Verified By | Approved By |
| Signature & Name | Signature & Name | Signature & Name |
| Date | Date | Date |