

Administration Form

To : **DBS Bank Ltd – Channel Management**
Newton Post Office
PO Box 069
Singapore 912203



Use this form for the following:

- Unlock User
- Request for New PIN
- Unlock Security Device
- Replace Security Device
- Enable User

1. COMPANY PROFILE

| | |
|--|--|
| Organisation ID | |
| Company's Name | |
| Notes: | |
| <ul style="list-style-type: none"> • Please specify your Organisation ID used for the login to IDEAL™ • Please specify your Company Name as per the one used for the application of IDEAL™ | |

2. LOGIN PIN / TOKEN (if applicable)

| User Full Name / User ID / Security Device Serial No / Unlock Code | Email Address | Unlock User | Request for New Login PIN | Unlock Security Device | Replace Security Device | Enable User |
|---|---------------|--------------------------|------------------------------|---------------------------|----------------------------|--------------------------|
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- Notes:**
- Please specify the User Full Name and User ID if you require the bank to reset the login pin or unlock the user access.
 - **For Reset of Token PIN, there is no need to return the physical Token. Just indicate the User Full Name, Token Serial and Token Unlock Code.**
 - Please specify the User Full Name, User ID and Token Serial Number if you require replacing the Token. The physical Token must be returned for replacement.

3. AUTHORISED SIGNATORIES

| | | |
|--------------------|--|--|
| Name of Authoriser | | |
| Signature | | |
| Date | | |

For partnership, the signatures of all partners are required. For a company which has furnished DBS Bank Ltd with a standalone Electronic Banking Board Resolution, the authorised signatories must be the current authorised signatories specified in that document. For a company which has furnished DBS Bank Ltd with a Board Resolution for the opening of the current account that covers Electronic Banking services, the authorised signatories must be the current authorised signatories with the highest authorisation limit as specified in that document.

FOR BANK USE ONLY

| CHANNEL CREATOR | CHANNEL AUTHORISER |
|-----------------|--------------------|
| Name | Name |
| Signature | Signature |
| Date | Date |

