

SSB8: INSTRUCTION FOR DEBIT/ CREDIT CARD (For both main/ supplementary credit cardholders)

If only **Part A** is completed, please send to: DBS-Bank-Credit Ops, 2 Changi Business Park Crescent, #07-03, DBS Asia Hub, S486029
 Otherwise, please send to: DBS-Bank-Acct Svs, 60 Alexandra Terrace, #05-16/17, The Comtech, S118502

* please delete accordingly

Name : _____ IC/ Passport No: _____ Contact No/ Mobile: _____

Debit/ Credit Card* No: _____

PART A: Replacement & Limit Change (For Credit Ops' action)

- | | |
|--|---|
| <input type="checkbox"/> Replace card due to | <input type="checkbox"/> Lost Debit/ Credit Card** } ** Fax 68789006 or call Lost Card No 1800-1111111 immediately |
| <input type="checkbox"/> Non-receipt | } Existing PIN to be used with new card issued. |
| <input type="checkbox"/> Damaged or Faulty Debit/ Credit Card | |
| <input type="checkbox"/> Change of language | <input type="checkbox"/> English <input type="checkbox"/> Selection @ATM |
| <input type="checkbox"/> Retained at ATM. Location: _____ | |
- Cancel card. Do not replace card. (You are not required to return the card to the Bank. Please cut up your card for security reasons)
- Increase Credit Card Limit (permanent) to S\$ _____ (Please attach the latest original payslip/ Income Tax assessment)
- Increase Credit Card Limit (temporary) to S\$ _____ Reason: _____
- Change Debit Card Primary Account to _____ (Existing card & PIN will be cancelled. A new card and PIN will be issued)
- All card transactions effected prior to date of DBS Bank's receipt of this application will be billed to the existing Card Account.
- Others: _____

PART B: Cash advance/ add linkage for ATM use / debit card acknowledgement & spending limit update (For Acct Svs' action)

Please designate only 1st party accounts. No linking to 3rd party accounts allowed.

1 CREDIT CARD

- Please reissue me a PIN
 For credit cards, upon linkage of your bank account(s) to your card, we will issue you a PIN for your use at the ATM.
If you have an existing ATM Cash Advance PIN, you may continue to use this PIN at the ATM.

Please set my primary account as: _____

CPF/ ASPF investment account (✓ if this is the only account applied for)

Terminate link facility

2 DEBIT CARD

Spending Limit

Change spending limit to S\$ _____ Permanent Temporary Effective from ___/___/___ until ___/___/___

Acknowledgement

- I acknowledge that I have received my DBS MoneySmart Debit MasterCard/ POSB MasterCard Debit Card.
 Please send me the PIN & Activate the use of my Card (for cardholders who are overseas or do not have an existing ATM card to activate the debit card at the ATM)

3 LINKAGE OPTIONS

I wish to designate other secondary account(s): _____ , _____

Please delete my following secondary account(s): _____ , _____

Daily NETS limit \$500 \$1000 \$2000 \$3000 (std \$2K for credit & debit card)

Daily ATM cash withdrawal limit \$500 \$1000 \$2000 \$3000 (std \$1K for credit card / \$2K for debit card)

Daily 3rd party funds transfer limit \$3000 \$5000 (std \$3K for credit card / \$5K for debit card)

4 OTHERS _____

Declaration (Important: Pls read before signing):

1. I have received a copy of, read and understood and I agree to be bound by the terms & Conditions Governing Electronic Services and, where applicable, the Terms & Conditions Governing Accounts, the Terms & Conditions Governing DBS Savings Plus Accounts, the DBS Debit Card Cardholder Agreement and the Debit ATM Card (Unembossed Cards) Agreement.

2. I agree that in the event that I am issued with the new DBS/POSB American Express/MasterCard/VISA Card(s) for any reason whatsoever, DBS Bank is authorised to link the new card(s) issued to me to the DBS/POSB account(s) as stated herein, unless I instruct DBS Bank otherwise in writing. I further agree that all the terms and conditions herein and Terms shall continue to apply and bind me in respect of the link facility for the new card(s) issued to me.

Cardholder's signature/ thumbprint# _____

Please sign as per your DBS/ POSB account records. #Thumbprint taking needs to be witnessed at the branch by our Bank staff.

FOR BANK'S USE ONLY

Action by Branch Signature/Thumbprint Verified by: _____ Authorised by: _____ Branch Name/ Branch Code: _____	Action by Credit Ops (CP no: AH0016) Attended by: _____ Authorised by: _____ Branch Name/ Branch Code: _____	Action by Account Services (CP no: CT0008) Authorised by: _____ Keyed in by: _____ Report checked by: _____
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