

PAYNOW CORPORATE - SGQR FORM

1. USE THIS SECTION TO GUIDE YOU ON FILLING UP THE FORM								
For Registration (Please select one that applies)			For Amendment (Please select all that apply)					
My business does not hav	e an SQQR, how do I get one?		I want to add PayNow to my SGQR Label.					
Please fill up all sections except 3a			Please fill up all sections except Label Name and Outlet Address under Section 3b.					
I have existing SGQR for my outlets and I need SGQR labels for my new outlets.		R 📗	I want to change the PayNow Payment Reference on my SGQR.					
Please fill up all sections except 3a			Please fill up all sections. For Section 3b, fill up only Payment Reference.					
My outlet is moving to a new location, I need a new SGQR.								
Please fill up the all sections except 3a.			Please fill up all sections. For Section 3b, fill up only Name on Label.					
2. BUSINESS / ORGANISA	TION INFORMATION							
Registered Name								
Registration Number/UEN								
3a. SGQR ID (IF APPLICAB	LE)							
Existing SGQR ID								
3b. DETAILS REQUIRED FOR SGQR								
PayNow Proxy (e.g. UEN+Suffix)								
Name on Label (Max 25 chars with spaces)								
Outlet Address	Postal Code							
	Outlet Level		Unit Number					
Payment Reference (Max 25 chars with spaces)	(OPTIONAL)							
Do you need printed SGQR labels?	□ Yes	□No	Number of SGQR Labels (4 free SGQR labels will be provided. Charges apply for additional labels as per pricing guide.)					
3c. CONTACT DETAILS								
Name			Contact Number					
Email Address (Email address is used for sending notification on the status of the request and pdf copies of the SGQR.)	1.		3.					
	2.		4.					
3d. DEBITING ACCOUNT FOR ADDITIONAL LABELS (IF LEFT BLANK, CHARGES WILL BE DEBITED FROM PAYNOW LINKED ACCOUNT)								
Debiting Account								

4. DECLARATION, ACCEPTANCE & CONSENT

I/We wish to apply for your services to facilitate my/our registration and/or update of my/our PayNow corporate proxy with the central repository for the SGQR (the "CR") and such other related services for facilitating payments from my/our customers to me/us through the SGQR scheme. By submitting this application form, I/we warrant, represent and undertake as follows:

True and Accurate Information

I/We confirm that the information and documents given in this application are complete, true and accurate. I/We understand that you are under no duty or obligation to verify and authenticate any information and documents provided by me/us and that I/we bear all responsibility in any errors and all matters arising from any incomplete, untrue or inaccurate information.

Terms and Conditions

By signing and submitting this form, I/we agree to be bound by the "Terms and Conditions Governing SGQR Service" (the "Terms"), a copy of which is appended hereto and which I/we have read. Terms used in this application which are defined in the Terms shall bear the same meanings.

Personal Data

I/We consent to you collecting, using, archiving, storing and/or disclosing any and all information and Personal Data (as defined under the Personal Data Protection Act 2012) which I/we provide to you or arising from our use of the Services or Transactions (the "Data") for any and all purposes relating to my/our use of or participation in the Singapore Quick Response Code (SGQR) Scheme (the "Scheme") and/or your provision of any services to me/us.

Without limitation to the foregoing, I/we authorize and consent to:

- (a) you disclosing to the operator of the Scheme (the "**Operator**") and the SGQR Scheme owners (the "**Owners**") the Data for the purpose of providing, maintaining and enhancing the Scheme and related services;
- (b) your uploading the Data to the CR; and
- (c) the disclosure to the public (by the Operator, Owners or you) of any of the following as may be derived or generated from the Data:
 - my/our SGQR quick response code;
 - (ii) my/our unique identification(s) in the CR, comprising such information and particulars as required by you and/or the Operator from time to time; and
 - (iii) any file or output as provided by the Operator to you or generated by you in such format approved by the Owners; and
- (d) you, the Operator or any third party service providers of the Operator or Owners disclosing, processing and using the Data for conducting analysis to understand market behaviour, preferences and trends, and to review, develop and improve the quality of any services;
- (e) the Operator receiving, processing, archiving and retransmitting the Data to all members of the Scheme, their affiliates and customers.

I/We confirm the accuracy, truthfulness and completeness of the Data provided to you and where Personal Data or information of any other person is provided to you, I/We confirm that I/we have provided notice to and procured such person's consent for disclosure and use of such Personal Data and information for the purposes stated above.

I/We undertake to inform you promptly in writing where there are any changes in the Data.

My/Our consent and authorization herein shall be without prejudice to and does not limit or derogate from any other consent or authorization given to you pursuant to any other agreement.

Authorised Signatory

The person(s) signing and submitting this application (the "**Signatory**") has/have been duly authorised by us to do so and I/we have passed, obtained and/or executed all necessary internal and/or corporate resolutions, authorisations and other action in accordance with our constitutional documents for the Signatory to sign and submit this application and to be my/our sole representative to you in all matters relating to the agreement comprised herein and in the Terms.

Indemnity

I/We undertake to indemnify you for any and all losses, liabilities, damages, costs, charges and expenses (including legal costs), actions, demands and proceedings including those incurred or sustained in connection with any enquiry, investigation, action, suit, proceeding, claim, demand, judgment, award, order or settlement, arising from any breach of my/our obligations herein.

Authorized Signatory	Authorized Signatory	
Name/ Designation:	Name/ Designation:	
Date:	Date:	

^{*} Please submit completed form at any of the DBS/POSB branches or via your RMs.

ANNEX

Details of Outlet 2:

3a. SGQR ID (IF APPLICAE	BLE)								
Existing SGQR ID									
3b. DETAILS REQUIRED FOR SGQR									
PayNow Proxy (e.g. UEN+Suffix)									
Name on Label (Max 25 chars with spaces)									
Outlet Address	Postal Code								
	Outlet Level		Unit Number						
Payment Reference (Max 25 chars with spaces)	(OPTIONAL)								
Do you need printed SGQR labels?	□ Yes	□No	Number of SGQR Lab (4 free SGQR labels will be for additional labels as per	provided. Charges apply					
3c. CONTACT DETAILS									
Name			Contact Number						
Email Address (Email address is used for sending notification on the status of the request and pdf copies of the SGQR.)	1.		3.						
	2.		4.						
Details of Outlet 3:									
3a. SGQR ID (IF APPLICAE	BLE)								
Existing SGQR ID									
3b. DETAILS REQUIRED F	OR SGQR								
PayNow Proxy (e.g. UEN+Suffix)									
Name on Label (Max 25 chars with spaces)									
Outlet Address	Postal Code								
	Outlet Level		Unit Number						
Payment Reference (Max 25 chars with spaces)	(OPTIONAL)								
Do you need printed SGQR labels?	□ Yes	□No	Number of SGQR Lab (4 free SGQR labels will be for additional labels as per	provided. Charges apply					
3c. CONTACT DETAILS									
Name			Contact Number						
Email Address (Email address is used for sending notification on the status of the request and pdf copies of the SGQR.)	1.		3.						
	2.		4.						

^{*}Append Annex as necessary