

# DBS IDEAL™

## MAINTENANCE FORM (FOR SUBMISSION TO BANK)

Company Name\* \_\_\_\_\_

Organisation ID\* \_\_\_\_\_

Please complete this form in **BLOCK LETTERS**.

\*Mandatory Fields

### 3 Add New/Edit Existing User

Tick where applicable



Note: As a part of the verification process, we require you to provide us with a working mobile number and email address.

☐ Add **OR** ☐ Supersede **OR** ☐ Remove

Name (as in NRIC/Passport)\* \_\_\_\_\_ NRIC/Passport No.\* \_\_\_\_\_

Nationality\* \_\_\_\_\_ Date of Birth (DD/MM/YYYY)\* \_\_\_\_\_

Preferred IDEAL™ User ID  
(8-12 alphanumeric characters, ie. A-Z, 0-9) \_\_\_\_\_ Mobile No.\* \_\_\_\_\_

Email\* \_\_\_\_\_

#### Service(s) & Role(s)

##### Transaction

Role(s) Service(s)	Transaction Maker	Transaction Authoriser	Please indicate authoriser group for this user: (e.g. A, B, C, D, or E, if applicable to Authorisation Policy)
Payment			
Payroll			
Collection			
Trade			
Others _____			

☐ Enquiry

☐ DealOnline (Foreign Exchange)<sup>1</sup>

☐ Admin Officer

☐ Contact Person

Additional Information

Access to which Account(s)?

☐ All IDEAL™ Accounts

**OR**

☐ The Accounts Listed Below

☐ Add **OR** ☐ Supersede **OR** ☐ Remove

Name (as in NRIC/Passport)\* \_\_\_\_\_ NRIC/Passport No.\* \_\_\_\_\_

Nationality\* \_\_\_\_\_ Date of Birth (DD/MM/YYYY)\* \_\_\_\_\_

Preferred IDEAL™ User ID  
(8-12 alphanumeric characters, ie. A-Z, 0-9) \_\_\_\_\_ Mobile No.\* \_\_\_\_\_

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**OR**

☐ The Accounts Listed Below

<sup>1</sup> Separate control policy applies, refer to **Reference Notes** section **C**

By signing this form, I/we have confirm that I/we have read "Maintenance Form Reference - Section D: Agreement and Authorized Signatories" and agree to abide and be bound by such terms and conditions.

Authorised signatories required

Name:  
Date:

Signature:  
**SIGN HERE**

Name:  
Date:

Signature:  
**SIGN HERE**