

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)¹

Admin Officer

Contact Person

Additional Information

Access to which Account(s)?

All IDEAL™ Accounts

OR

The Accounts Listed Below

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

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 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

¹ 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