

SSB1: APPLICATION/UPDATES FOR SELF-SERVICE BANKING SERVICES (INDIVIDUAL)

- ATM Card/ Internet Banking (“iBanking”)/Phone Banking User ID/PIN will be mailed via ordinary mail to the address of the primary account.
- Account holders between 12 and 15 years old are not eligible to apply for ATM Card unless with parental/guardian/joint holder consent.
- Account holders below 16 years old are not eligible to apply for iBanking.

Please send to: DBS Bank Ltd – Account Services, Simpang Bedok Post Office, PO Box 215, Singapore 914808.

Name:	
IC/ Passport No.:	

PART A: ATM Card Application**I would like to apply for** (*appropriate box*) : DBS ATM Card POSB ATM Card**Name to appear on ATM Card and display over the ATM** (Limit to 23 characters)

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Important Note: Please also complete Part C to assign the savings/current account to be linked to your ATM Card, allow/disallow the Magnetic Stripe for Overseas Use, set the cash withdrawal limit, funds transfer limit and NETS limit for your ATM Card.**PART B: DBS/POSB ATM Card Replacement****Existing ATM Card Number:** DBS ATM Card : _____ POSB ATM Card : _____**Replace the above ATM Card due to:**

- Lost Card (Please call Lost Card No. at 18001111111 immediately to report loss of your Card.)
- Non-receipt of Card
- Damaged / Faulty
- Change of name embossed on the Card to: _____
(Max 23 characters.)
- Retained at ATM. Location: _____
- Change of Language Choice: English Selection at ATM

Note: A \$5 ATM Card replacement fee is applicable for Lost Card.

PART C: Magnetic Stripe for Overseas Use, ATM Card Limits and Linkage**Existing ATM Card Number**
(where applicable) DBS ATM Card: _____ POSB ATM Card: _____**Magnetic Stripe (Overseas Use)**

- Disallow
- Allow from ____/____/____ (dd/mm/yy) to ____/____/____ (dd/mm/yy)
- Start Now with No Expiry Date

Daily ATM Cash Withdrawal Limit ¹ S\$500 S\$1,000 S\$2,000 S\$3,000 S\$5,000 S\$9,000**Daily ATM 3rd Party Funds Transfer Limit** ¹ S\$3,000 S\$5,000 S\$9,000**Daily NETS Limit** ¹ S\$500 S\$1,000 S\$2,000 S\$3,000 S\$5,000 S\$9,000**Primary Account No. (S\$Current/Autosave/Savings/Savings Plus):** _____Primary account is used for ATM Card transactions without account selection, e.g. ATM Fast Cash / NETS, correspondence and where applicable, Bill Payment service and debiting of fees. The Card and the PIN's mailing address will follow the address of the primary account.**Secondary Account(s) to be linked to my ATM Card:**

1)	3)
2)	4)

 Please reissue me a PIN for my DBS/POSB ATM Card. CPF Investment (if this is the only account applied)

- For existing users, account(s) stated above will be included to the respective services, and account will supersede previous primary account specified.
- Auto-access to CPF Investment Account & Securities Financing Account (SFA) if one S\$ CA/ATS/SA/SP is tagged to the service.

¹ If no limit is selected for new ATM Card application, limit will be set to the corresponding default limit:

- default daily cash withdrawal limit: S\$2,000 [S\$200 for age < 16];
- default daily ATM 3rd party funds transfer limit: S\$5,000;
- default daily NETS limit: S\$2,000 [S\$200 for age < 16; NETS limit change is not allowed for age < 16]).

PART D: CashCard Refund, Card Activation, Secondary Account Deletion and Card Cancellation Refund of Balance in CashCard Chip on ATM Card (CashCard balance not refundable for lost card.)IMPT: Please send the ATM Card to DBS Bank Ltd – Account Services. Refund will be based on the chip balance or DBS' host balance whichever is lower. I authorise DBS to activate my ATM Card. I acknowledge that I have received my ATM Card and/or PIN via mail. Terminate my DBS/POSB ATM Card. Do not replace Card. (Card will be terminated within 3 working days upon receipt of this form.)**Delete the Secondary Account(s) linked to my ATM Card:**

1)	3)
2)	4)

PART E: Phone Banking Application/ Updates

Primary Account for Phone Banking: S\$Current/Autosave/Savings/Savings Plus* _____

- Please issue me a Phone Banking account and link the above account as my primary account for Phone Banking:
- Please reissue me a new PIN for my Phone Banking which is linked to the above account.
- Please reissue me a new PIN and User ID for my Phone Banking which is linked to the above account.

PART F: iBanking Application

Primary Account for iBanking: S\$Current/Autosave/Savings/Savings Plus* _____

- Please issue me iBanking account and link the above account as my primary account for iBanking:

PART G: Declaration (Important: Please read before signing)

1. I acknowledge that:
 - I have received my ATM Card and selected my ATM Card PIN at DBS.
 - I have selected my Phone Banking PIN at DBS.
 - I have received my iBanking UID and selected my iBanking PIN at DBS.
2. For replacement/termination of card: I acknowledge that the ATM Card was disposed at the Branch securely.
3. I agree to be bound by the Terms and Conditions Governing Electronic Services, which apply to the self-service banking facilities herein. I understand that a copy of the Terms and Conditions Governing Electronic Services is available at www.dbs.com.sg.
4. The ATM Card ("Card") and PIN shall be sent to me by mail to my mailing address at my own risk. I understand that it is my responsibility to take necessary precautions to safeguard my Card and PIN.
5. I agree that the primary account(s) as stated in Part C/E/F* will be linked to my ATM Card/Phone Banking/iBanking* account respectively as specified by me.
6. I agree that the secondary account(s) as stated in Part C are in order of priority.
7. I agree that if my primary account is terminated for whatever reason, DBS Bank Ltd ("DBS") is entitled to link the secondary account as stated herein as the primary account for my ATM Card, subject to DBS' approval.
8. I confirm that the information given in this application is complete, true and accurate. If any of the information given herein changes or becomes inaccurate in any way, I shall immediately inform DBS of such change or inaccuracy.
9. I acknowledge that DBS has the absolute right to approve or reject my application without notice and without assigning any reason whatsoever.
10. I understand and acknowledge that this application will be processed within 5 working days upon DBS' receipt of the completed form.
11. I further confirm that I have read and understood and hereby agree to be bound by the DBS Privacy Policy. I have obtained a copy of the DBS Privacy Policy by:
 - (a) downloading a soft copy from www.dbs.com.sg/privacy; or
 - (b) obtaining a hard copy from a DBS/POSB branch.
 I hereby consent to the collection, use, disclosure and processing of my personal data in accordance with the terms and conditions governing the products and/or services applied for herein and the DBS Privacy Policy, as may be amended by the Bank from time to time.
12. I am aware of Singapore's firm stance against illegal and illicit activities. I confirm that my application for this facility/product is not for illegitimate purposes and that this facility/product will not be used as a platform for illegal activities.

Declaration on Card's magnetic stripe for overseas use (where applicable)

1. I acknowledge and agree that:
 - i. allowing the Card's magnetic stripe for overseas use will enable me to perform (where applicable) (a) Cash withdrawal at overseas ATMs (except for DBS American Express® Cards); (b) Credit Card overseas Cash Advance; and/or (c) Credit Card and Debit Card overseas retail transactions at magnetic stripe (swipe) terminals;
 - ii. the magnetic stripe for overseas use can be subsequently allowed/disallowed via SMS, iBanking/mBanking or at any DBS/POSB ATMs in Singapore (Note: It is recommended that you set the magnetic stripe on your Card(s) to disallow overseas use when you are in Singapore because the risk of unauthorised transactions occurring on the Card is higher when the magnetic stripe is enabled for overseas use, as the magnetic stripe data can be easily copied.); and
 - iii. DBS reserves its rights to disable the magnetic stripe for overseas use at its discretion at any time without notice or liability to any party.

Signature/Thumbprint# Account Holder	Date

Thumbprint must be taken and witnessed at Branch. Please sign as per your DBS/ POSB Bank account records.

* Delete where applicable

For DBS Bank's Use Only

Action by Branch		Action by Credit Ops (CP no: AH0016)		Action by Account Services (CP no: AH0011)	
Attended By (Name, Signature, Date) (SV) (CS) IDS _____	Authorised By: (Name, Signature, Date) (SV) (CS) IDS _____	Attended by: Authorised by: Branch Name/Branch Code:	Authorised by: Keyed in by: Report checked by:		