

**Customer's Particulars**

|                         |                             |                   |
|-------------------------|-----------------------------|-------------------|
| Name (Dr/Mr/Mrs/Mdm/Ms) | Access Code (If Applicable) | NRIC/Passport No. |
| E-mail Address          | Contact Number              |                   |

**Phone Banking Services**

**Application** (I wish to apply for phone banking service)  
 **Reissue PIN** (Please re-issue my Phone Banking PIN as I have forgotten my PIN)  
 **Terminate** (Please terminate my Phone Banking service as I do not wish to use it any more)  
 **Re-activate** (Please re-activate my Phone Banking service as I have exceeded the maximum PIN tries)

**Accounts to be Accessed via Phone Banking**

All my Accounts (Savings, Current, Foreign Currency and Credit Cards); OR  
 Add / delete only the following accounts (Savings, Current, Foreign Currency account).

| Add                      | Delete                   | Account Number | Add                      | Delete                   | Account Number |
|--------------------------|--------------------------|----------------|--------------------------|--------------------------|----------------|
| <input type="checkbox"/> | <input type="checkbox"/> | _____          | <input type="checkbox"/> | <input type="checkbox"/> | _____          |
| <input type="checkbox"/> | <input type="checkbox"/> | _____          | <input type="checkbox"/> | <input type="checkbox"/> | _____          |

**Change of Daily 3<sup>rd</sup> Party Funds Transfer Limit – For Phone Banking Services (Personal)**

OCBC Phone Banking daily limit is defaulted to S\$3,000. Please select your new daily 3<sup>rd</sup> party Funds Transfer Limit.

|  |  |
|--|--|
| <input type="checkbox"/> Disable 3 <sup>rd</sup> Funds Transfer Service<br><input type="checkbox"/> S\$1,000<br><input type="checkbox"/> S\$3,000<br><input type="checkbox"/> S\$5,000<br><input type="checkbox"/> S\$10,000 | <b>For Bank Use</b><br>(PBP00)<br>(PBP01)<br>(PBP)<br>(PBP05)<br>(PBP10) |
|--|--|

**Pre – Signed Funds Transfer Service**

Applicable to Phone Banking and Internet Banking Services. (Please allow 2/3 working days for the transfers of 3<sup>rd</sup> party accounts)

I would like to add/delete the following accounts that I can transfer to:

1)  Add  Delete

Beneficiary Name \_\_\_\_\_

Bank Name/Branch Name \_\_\_\_\_ Account Number \_\_\_\_\_

**My initials to be printed on my beneficiary's statement (only applicable for "Add") :** \_\_\_\_\_ **Max 9 Characters**

**I would like this account to be identified as (only applicable for "Add") :**

My Account  My Husband's Account  My Parent's Account  My Child's Account  
 My Wife's Account  Others. I would like this account to be identified as \_\_\_\_\_ **Max 5 Characters**

2)  Add  Delete

Beneficiary Name \_\_\_\_\_

Bank Name/Branch Name \_\_\_\_\_ Account Number \_\_\_\_\_

**My initials to be printed on my beneficiary's statement (only applicable for "Add") :** \_\_\_\_\_ **Max 9 Characters**

**I would like this account to be identified as (only applicable for "Add") :**

My Account  My Husband's Account  My Parent's Account  My Child's Account  
 My Wife's Account  Others. I would like this account to be identified as \_\_\_\_\_ **Max 5 Characters**

**Bill Payment**

Applicable to Phone Banking, ATM and Internet Banking Services (please allow 2/3 working days for organisations to receive payment)

| Add                      | Delete                   | Name of Organisation | Bill Reference Number |
|--------------------------|--------------------------|----------------------|-----------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | _____                | _____                 |
| <input type="checkbox"/> | <input type="checkbox"/> | _____                | _____                 |

**Agreement**

I agree to abide and be bound by the Terms And Conditions Governing Electronic Banking Services \* which I have read and any amendments, alterations and additions thereto as may be from time to time be made I consent to disclosures as provided therein and agree that all payments be debited to my account(s) with you

\_\_\_\_\_  
Signature & Date (For Bank records using thumbprints, please visit any OCBC branch for verification)

**For Bank Use**

|         |               |                              |
|---------|---------------|------------------------------|
| Remarks | Verified By : | Processed by (Date and Time) |
|---------|---------------|------------------------------|

\* Available all OCBC bank branches and at [www.ocbc.com](http://www.ocbc.com)

Postage will  
be paid by  
addressee.  
For posting in  
Singapore only.

**BUSINESS REPLY SERVICE  
PERMIT NO. 07049**



**Oversea-Chinese Banking Corporation Ltd**  
Account Services (eBanking)  
Bras Basah Post Office  
Locked Bag Service No. 8  
Singapore 911886

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