

Application will be processed within 7 days upon receipt of the original form

 Please complete this form and mail it to:
 Attn: Velocity@ocbc Helpdesk, Group Transaction Banking
 65 Chulia Street, #11-00 OCBC Centre, Singapore 049513

| COMPANY INFORMATION | | | |
|--|--|-----|--------|
| Company Name | | | |
| Contact Person Full Name <i>(To contact me if clarification required pertaining to this form)</i> | Telephone | Fax | Mobile |
| Velocity@ocbc Organisation ID | Email Address | | |
| Digipass Charging Account | <i>\$S20 will be debited from this account for new digipass issued, except faulty digipass replacement</i> | | |

| 1. PASSWORD SERVICE REQUEST | |
|---|--|
| <input type="checkbox"/> Re-issue Password <i>(I have forgotten my password, issue and mail new password to me)</i> | <input type="checkbox"/> Re-activate Password <i>(I remember my password but have exceeded the maximum tries at login, reactivate and contact me when completed)</i> |
| User Name / ID _____ | User Name / ID _____ |

| 2. DIGIPASS SERVICE REQUEST | |
|---|---|
| <input type="checkbox"/> Lost Digipass¹ - Issue New Digipass <i>(I have lost my Digipass, issue me a new one and \$S20 will be debited from my account as indicated above)</i> | <input type="checkbox"/> Defective Digipass - Issue New Digipass <i>(My defective Digipass is enclosed, Issue me a replacement)</i> |
| User Name / ID _____ | User Name / ID _____ |

| 3. ACCOUNTS TO BE ACCESSED | | 4. BILL PAYMENT | |
|--|--|-----------------|--|
| Add <input type="checkbox"/> Delete <input type="checkbox"/> Currency _____ _____ _____ _____ | Add <input type="checkbox"/> Delete <input type="checkbox"/> Billing Org. _____ Billing Ref. No. _____ _____ _____ | | |

| 5. AUTHORISED USER <i>(For Basic and Classic service packages only. For Premium service package complete the User and Authorisation Matrix Form)</i> | | | | | | |
|--|--------|------|------------------------------------|------|-------------------------------|---|
| <i>(Please tick one ✓)</i> | | | | | | |
| Add | Delete | Edit | Issue Digipass | Name | User Name/ID (max 12 char) | Services to be tagged to Authorised User |
| | | | Yes ¹ / No ² | | | <input type="checkbox"/> Inquiry <input type="checkbox"/> Creator <input type="checkbox"/> Administrator |
| | | | Yes ¹ / No ² | | | <input type="checkbox"/> Inquiry <input type="checkbox"/> Creator <input type="checkbox"/> Administrator |
| | | | Yes ¹ / No ² | | | <input type="checkbox"/> Inquiry <input type="checkbox"/> Authoriser <input type="checkbox"/> Administrator |
| | | | Yes ¹ / No ² | | | <input type="checkbox"/> Inquiry <input type="checkbox"/> Authoriser <input type="checkbox"/> Administrator |

| 6. VELOCITY PRIMARY CONTACT <i>(OCBC will contact the Velocity Primary Contact for any future issues related to Velocity@ocbc)</i> | | | | | | |
|--|--------|-----------|-----------|-----|--------|---------------|
| Add | Delete | Full Name | Telephone | Fax | Mobile | Email Address |
| ✓ | | | | | | |
| | ✓ | | | | | |

| 7. AUTHORISED USER <i>(For Basic Plus Service Package only)</i> | | | | | | | | | |
|---|--------|------|------------------------------------|------|-------------------------------|--|-----------------------------------|------------------------------|--|
| <i>(Please tick one ✓)</i> | | | | | | | | | |
| Add | Delete | Edit | Issue Digipass | Name | User Name/ID (max 12 char) | Mobile Number <i>Mandatory</i> <i>(only Singapore-registered mobile phone nos. are eligible)</i> | Email Address <i>Mandatory</i> | Account Inquiry ⁵ | Creator ⁶ / Authorise ⁷ |
| | | | Yes ¹ / No ² | | | | | ✓ | ✓ |
| | | | Yes ¹ / No ² | | | | | ✓ | ✓ |

Agreement

To: Oversea-Chinese Banking Corporation Limited ("OCBC Bank")
 I/We agree to abide and be bound by the Business Account Terms and Conditions (available at all OCBC Bank branches and at www.ocbc.com) which I/We have read and any amendments, alterations and additions thereto as may from time to time be made. I/We consent to disclosures as provided therein and agree that all payments be debited from my/our account(s) with you.
 The person(s) whose information appear in the Authorised User section above and/or in other letter(s) of instruction is/are authorised to perform and effect the above services opted by me/us at any time and from time to time for and on my/our behalf in relation to the abovementioned accounts. I/We confirm that the abovementioned Authorised User(s) has/have sufficient authority to perform and effect all transactions of such services for and on my/our behalf and all such transactions shall be binding and conclusive on me/us.
 By signing below I/we confirm that I /we am/are authorised to sign the application form for and on behalf of the company /association/club/society/partnership.

 Authorised Signatory³
 Name
 Date

 Authorised Signatory
 Name
 Date

Note 1 - Issue us a new Digipass for this Authorised User and debit our account for \$S20 per Digipass.

Note 2 - We have spare/unused Velocity@ocbc digipass(es) and do not require any more digipass(es)

Note 3 - For Section 1, 2, 4 and 6, signing condition in accordance to payment highest signing limit. For Section 3 and 5, signing condition in accordance to your signing mandate for Velocity@ocbc

| 8. FOR BANK USE | | |
|-------------------------|---|---|
| Signature Verified/Date | Maker/Date <input type="checkbox"/> TAM De-Activated | Checker/Date <input type="checkbox"/> TAM De-Activated |
| Change Address | Contacted Customer/Date | |
| Remarks | | |