## **HHUOB**

## Commercial Card (Cardmember) Application Form

Level 15, UOB Plaza 1 KL, 7 Jalan Raja Laut, 50350			
Purchasing Card	Corporate Card	Platinum Business Card	Business Signature Card
1. Corporate Member Details Corporate Member Registered Name			
Corporate Member Registration / Company N			
(Ne Credit Limit to be Assigned to the Cardmemb  RM  Name to be embossed on Card (if required & m	er (in 000's only) *Subject to approval $k = 0$	(Old) py United Overseas Bank (Malaysia) Bhd.	
Name of Corporate Member's Authorised Sig	natory	Position(s)	
Commercial Charge Card Facility, as the case	may be (a copy of which is available for	y the Terms and Conditions of UOB Commercial Cr r viewing at the Bank's website) and agree to be fully ember until UOBM has confirmed that we have return	liable for all liabilities incurred
Corporate Member Stamp:			
Signature:	Date:		
Corporate Member Authoris			
2. Details Of Authorised Cardmember			
Mr Ms Mdm (As in NRIC/Passport, underline surname)	Others	Sex 🗌 Male 🗌 Female	
Name To Appear On Card (The name should be ider	tical to NRIC/Passport) (Not more than 19 characters)		
NRIC/Passport No.           Old	New               -	Date of Birth	
Passport Issuance Date	Passport Expiry Date	Day Mth	Yr
Citizenship	Residence Country		
·		] No	-
		e Malay Chinese Indian Other	s
	(Applies to Foreigners only)		
Postcode City	Гоwn		
State			
Country			
	ndphone No.		
E-mail Address			
Residence Is Owned Po	arent's Employer's Rent	ted Mortgaged	
Bill To Home Office			
Home Country Address         (For Non-Malaysian and Nor           L1	-Malaysian PR Only)		
L2			
L3			
Postcode City	Гоwn		
State			
Country			
Please provide justification if Home Country	Address does not match with Country of	f Citizenship	

## **WOB**

## 3. My Security Code

Mother's Maiden Name (For verification purposes)

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4. My Emp	ploym	ient D	etai	s																										
Office Addre	ess																													
L1																														
L2																														
L3																														
Postcode						City To	own													ĺ										
State								<u> </u>																						
Country		İ		ĺ	İ							İ						1					ĺ			ĺ				
Tel No.				Er	nploy	ee ID				.	Natu	re of	Busi	ness			1				Оссі	upati	on							/
Position Held	d													Years	of Se	ervice				A	เกทบ	al Inc	come	e : R/	Μ					
Employment	<i>'</i> ''		mploy	er	] Govt	Empl	oyee		Privo	ite En	nploy	ee	Se Se	elf-Em	ploye	ed	C	utsic	le Lo	abou	r For	rce								
Name																														
Tel No.													1	Staff I	D/La	st 4 c	ligit c	of NR	IC											
E-mail Addre	ess										Relat	ionsh	nip/P	ositio	า															
6. Declard	ation																													
By signing be conditions o Agreement ( are available information reporting ag disclose fror Cardmember distribution of consent to the indicated by bankrupt. I [https://www. relationship of the Card(5) Senvice Tax 4	n the ( "Charge for v provic gencies n time r Agre and pr he linki v UOBi hereb w.uob. with U s) as s	Card u ge Car riewing led ar s and e to tin ement rovisio ing of M) wh by cor com.m IOBM pecifie	inder d Cai g at L any c any c and/ n of L UOB ich m ifirm ny]). I and c ed in	the UOI cdmemb IOBM's obtain other so ny infor or Char JOBM's Visa Ca ay be i that I unders agree to this forr	B VISA ber Ag webs from ources mation ge Ca produ rd(s) c ncurre have tand to be bc m or th	/Mas reem ite. In any f that n on rd Ca Jot ar acce that t bund l acce	sterCo ent") warro inano UOB me co urdme or Ma respe ss to the P by the ovisio	ard Co as the ant the cial ins M sho and m ember rvices sterCo ect to and rivacy e same on of s	ardme e case at the stituti II dee y acc Agree . I ack ard(s) the C have Noti e. I sh ervice	ember e may on, the em ne counts emen counts emen counts e rec card i e rec ca (a call be es by	r Agre be. I rmation eccesso to t t with edge 3D S ssuec id the s ma liabl UOB/	eemel on giv rector ary a he Ca out fi that e lat y be e to p W to r	nt ("C ersta ven il r Ger ny in orpol urthe the ( e OTF ne ar est \ ame oay fo me o	Cardm nd this neral of formo rate <i>N</i> rate <i>N</i> Card r P. I ag nd he versio nded or any r at a	embe at the form of Inle tion Memb ce to emai ree th reby n of from sales ny do	er Agi are t and F which er ar me fo nat I s warro UOB time s and te su	reeme dmem rue a Reven 0 UOE nd to or suc e prop hall k ant th M's to ti servi bseq	ent") ber / nd a ue, c 3M m the h pur berty be joi at a Priva me) ce ta uent	and Agre ccur red person of l pos of l ntly t the cy l form x or to t	/or U eeme ate c it info requi sons e or e JOB/ and e time Notic n a p othe he at	IOB Int ar and I ormo re. I as n expe M an seve e of e (c art r tax	Visa/ nd/or l con- ation here menti dient dient this acces of th ces or e, is re	Mas r Cho sent or c by c one t in c ost b liabl app sible e te r levi equi	sterC arge arge canceredi conse d in conse e ref le fo licat e rms ies w red b	Card Card I aut t refe ent to the torne turne r all I ion, I UOI and /hich by Iav	Chang d Car horis erence o and "Disc n wit d up iabili am 3 bro conc as at w (ind	ge Ca dmer e UO e pro d aut losur h this on U ties ( not c anche dition t the cludir	and C mber BM f ovide horis e" cl app OBN unles an ur es a s gc date ng th	ardm Agre to ver ers or e UC ause lication s oth ndisch nd w vernin of iss e Salo	ember ement ify the credit BM to of the on, the quest. I erwise harged vebsite ng our suance es and

payable to UOBM. I consent and agree that any sales and service tax or other taxes or levies incurred by UOBM in relation to the Card(s) as specified above by me or the provision of services by UOBM to me, shall be borne by and charged to me and in the event that UOBM shall effect payment on my behalf. I shall be liable to reimburse UOBM for such amounts paid. I am aware that I may receive calls, SMS and marketing collateral/information on products and services of other UOB Group companies not distributed by UOBM. In the event that I choose not to receive such calls or marketing collateral/information, I am aware that I will have to take steps to contact UOB Contact Centre 03-26128121.

\*I hereby consent to the Bank to disclose any information (not including my banking details/banking affairs) that I have provided, to the Bank's authorized third party merchants, other entities within the UOB Group or business strategic partners for marketing, promotional and/or cross-selling purposes.

🗌 Yes		] No
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I understand that at any time in the future, should I intend to withdraw my consent, I can submit a request at any UOB branch or via email to uobcustomerservice@uob.com.my (or such other address notified by the Bank).

Note : The provision of this form does not necessarily indicate that UOBM will accept and issue the Card to the Cardmember. UOBM reserves the right to reject any application without assigning any reasons whatsoever.

Applicant's Signature
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Date

Before you acknowledge receipt and/or use the Visa/MasterCard Card issued by United Overseas Bank (Malaysia) Berhad, please read carefully the Terms and Conditions under the Cardmember Agreement that will be sent with the Visa/MasterCard Card. For a full and detailed list of our charges, kindly log on to our website www.uob.com.my

7. For Bank U	Jse Only		
For Branch/Inte	ernal Use		CORP. ACC. NO.
Introduced and	l/or Completed By		DIV. ACC. NO.
Comments			COLL MODE
Name			Processing Group : A31
Signature		Date	BNM Assign ID :
Designation		Tel/Ext	For BPA Use
Staff ID			Source of Wealth
DIV/Dept/Br			Anticipated Account Activity:
Source Code			
Product Code			

United Overseas Bank (Malaysia) Bhd 199301017069 (271809-K)

