

Corporate ATM and Corporate PhoneBanking/PIN replacement requests

Please complete and send to: SOC Banking Operations The Hongkong and Shanghai Banking Corporation Limited
Robinson Road P.O. Box 896 Singapore 901746

Please tick (✓) where applicable

Customer information

Company name:

Contact person:

Company registration no.:

Telephone no.:

Corporate ATM: Card PIN

PhoneBanking: PIN

For ATM

Account no.: _____ Issue no.: _____
(front of the ATM card at the bottom right)

Reason for replacement: Damage Loss Pre-embossed ATM card

For PhoneBanking

PhoneBanking no. (PBN): _____

Name of user: _____

All cards/PIN will be mailed to the address maintained in the Bank's records.

Declaration

Confirmed by authorised signatory of the account
(If the account requires two signatories to sign jointly, kindly endorse both signatories above)

Date

For Bank use only

By mail:

Completed by:

Checked by:

(address ID in HUB)