

General Request Form for Debit Card Services

All fields marked with * should be filled up. For Personal Customers Only.

DEBIT CARD NO.

My Particulars

Name of Customer*

NRIC No. (new)* NRIC (old)/ PP No.

Address* Line 1

Line 2

Line 3

Postcode: Town/City: State: Country:

My Security Password* (Mother's Maiden Name-ATM customer only)

My Request Applied for Debit Card

☐ Please block my card which is found missing:
☐ Lost ☐ Stolen ☐ Others (please specify)

☐ I return my Debit card for cancellation. Reason: -
☐ Forgotten PIN ☐ Damage Card ☐ Apply New Card ☐ Others (please specify)

☐ Please issue me a replacement card

☐ Please delink the following from my Account listing:

☐ Please change my primary account for ATM transactions:
☐ Savings Account ☐ Savings Account-i
☐ Current Account ☐ Current Account-i

☐ Please change my primary account for Point-of-Sales (POS) / Plus ATM transactions:

☐ I request to reset my Debit card PIN count

☐ I request to activate/unblock my card

☐ I request to activate my ATM / Debit card PIN

☐ I request to ☐ activate ☐ deactivate my ATM service ☐ local ☐ overseas

☐ I request to ☐ activate ☐ deactivate my POS service ☐ local ☐ overseas

☐ I request to ☐ activate ☐ deactivate my Debit card contactless transactions

☐ I request to ☐ activate ☐ deactivate my e-Commerce service

☐ Please reset my POS daily spending limit RM (not exceeding RM15,000)

☐ Please reset my ATM / Debit card daily withdrawal limit RM (not exceeding RM10,000)

☐ Please reset my MEPS instant interbank fund transfer limit RM (not exceeding RM30,000)

☐ Please reset my Debit card cumulative contactless transaction limit RM (not exceeding RM250)

☐ Please reset my e-Commerce service daily spending limit RM (not exceeding RM15,000)

☐ Please reset my IBG daily limit RM (not exceeding RM20,000)

☐ Please reset my JOMPAY daily limit RM (not exceeding RM10,000)

Acknowledgement

☐ This is to confirm that I have witnessed the destruction of my old card.

Customer's Signature _____

Date:

D	D

 /

M	M

 /

Y	Y	Y	Y

Declaration

By signing below, I

- confirm that I have received a copy of the Debit Mastercard Terms and Conditions, Terms and Conditions governing Savings Account and Terms and Conditions governing Current Account (collectively, "Terms and Conditions") and I have read the same and confirm, I understand the contents and effects thereof;
- agree to be bound by the Terms and Conditions including any changes made to them by United Overseas Bank (Malaysia) Berhad ("UOBM") from time to time with notice at its sole discretion;
- agree to the extent permitted by law and provided always that the Bank has acted in good faith and that there is no negligence or willful default on the Bank's part, not to hold the Bank liable or responsible in respect of any and all actions, suits, proceedings, claims, demands, losses, costs, damages, liabilities and any expenses whatsoever which may be incurred by or made or taken against me/us in connection with or arising out of my/our application; confirm that I am /we are the parent/guardian of the Primary Applicant (where applicable);
- confirm that I am /we are the parent/guardian of the Primary Applicant (where applicable);
- consent to the application of the Primary Applicant aged between twelve (12) to eighteen (18) to open and maintain the account(s) and to utilize the service(s) specified in this application (where applicable);
- agree to the extent permitted by law and provided always that the Bank has acted in good faith and that there is no negligence or willful default on the Bank's part, to fully indemnify the Bank and keep the Bank harmless at all times from and against all claims, actions, proceedings, demands, losses, damages, costs, charges, liabilities and expenses whatsoever and howsoever incurred by the Bank in connection with or arising out of the Bank opening and maintaining the account(s) and providing the service(s) specified by me/us in this application
- consent to the linking of all my account(s) held with UOBM and instructions given for Bill Payment service (if applicable) to the ATM;
- acknowledge that all my account(s) held with UOBM shall be automatically registered for ATM Service unless I instruct you otherwise.
- agree to pay for any charges, fees, taxes, duties and levies incurred by UOBM in relation to the above request.
- understand that my decision to opt in for Overseas ATM, e-Commerce and/or POS overseas service may increase the risk of unauthorised or fraudulent charges transacted on my Debit card.

Customer's Signature _____

Date:

D	D

 /

M	M

 /

Y	Y	Y	Y

For Bank Use Only

Branch Code:

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CIF No.:

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Checklist:

- ☐ Original ID / passport sighted
- ☐ Signature verified

Enclosures:

- ☐ Copy of customer's NRIC/ passport / other ID

Verified / Input By _____

Approved By _____

Name: _____

Name: _____

Date: _____

Date: _____

For branch reference: ATM Service - Local (MATM), overseas (PLUS); POS services - Local (iPOS), Overseas (XPOS), Local & Oversea (BPOS);