

BUSINESS ACCOUNT UPDATE FORM

Please mail completed documents to:
Oversea-Chinese Banking Corporation Limited
Account Services
Bras Basah Post Office, Locked Bag Service No.8,
Singapore 911886

ACCOUNT INFORMATION

Name of Customer/Account Name: _____

Unique Entity/Registration/Gazette No: _____

PART A: ACCOUNTS TO BE UPDATED (Please tick/fill in accordingly)

 All OCBC accounts Only following OCBC accounts: 1) _____ 2) _____ 3) _____

PART B: CHANGES IN AUTHORISED SIGNATORIES/SIGNATURE/SIGNING MANDATE (To attach separate sheet(s) if necessary)

For additional authorised signatories, please list all person(s) authorised to sign or accept for and on behalf of the company/association/club/society/firm cheques, bills of exchange, orders to pay and any other instruments in respect of the Account(s). This shall be in addition to existing Authorised Signatories to the Account(s).

Change Required	Details	Group (if applicable)	Specimen Signature (mandatory for new authorised signatory)
<input type="checkbox"/> Add	Name:		
<input type="checkbox"/> Update Details	NRIC/Passport No.:		
<input type="checkbox"/> Remove	Designation:		
<input type="checkbox"/> Add	Name:		
<input type="checkbox"/> Update Details	NRIC/Passport No.:		
<input type="checkbox"/> Remove	Designation:		
<input type="checkbox"/> Add	Name:		
<input type="checkbox"/> Update Details	NRIC/Passport No.:		
<input type="checkbox"/> Remove	Designation:		

Signing conditions (please tick accordingly):

 Singly Any Two Jointly Others: _____

For new authorised signatories:

I/We hereby certify and confirm that the person(s) whose signature(s) appear above and acting according to the signing condition/mandate indicated above are authorised to draw, sign, endorse, accept or make for or on my/our behalf all cheques, bills of exchange, orders to pay and any other instructions (even if, where permitted by the Bank the relevant account is or will become overdrawn) in respect of or in connection with the Account(s), even though the payment is for the benefit of any employee, authorised person/signatory or individual order of any signing person without the Bank having to enquire into the circumstances or being liable in any way in respect of such payment and the Bank be and is authorised to honour any such cheques, bills of exchange, orders to pay and any other instruments.

The person(s) whose information appear(s) above 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 Account(s). I/We confirm that the abovementioned Authorised Signatories 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.

PART C: CONTACT PERSON CHANGES (authorised to receive and communicate customer information)

Change Required	Details	
<input type="checkbox"/> Add	Contact Name:	
<input type="checkbox"/> Update Details	Office Tel No.:	Office Fax No.:
<input type="checkbox"/> Remove	Mobile No.:	Email Address:
<input type="checkbox"/> Add	Contact Name:	
<input type="checkbox"/> Update Details	Office Tel No.:	Office Fax No.:
<input type="checkbox"/> Remove	Mobile No.:	Email Address:

PART D: CHANGE IN ADDRESS

 Company Registered Address* **Mailing Address**

* Change in company registered address must be accompanied with an ACRA Business Profile. Any Change in company registered address will be updated for all OCBC accounts.

AUTHORISATION (to be signed by persons authorised to make the above changes)

Name: _____ Date: _____ Name: _____ Date: _____

FOR BANK USE ONLY

For Branch/ BU Use (with signing code, if applicable)

For Account Services Use

Processed By/Date	Verified/Authorised By/Date	Branch/ Dept Name	Input By/ Date	Verified/ Authorised By/Date
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