



Account Information Update / Transfer / Closure

Name: _____

IC/Passport/Co. Registration No: _____ Trading Account No(s): _____

1. CHANGE ADDRESS / NAME / IC or PASSPORT NO / NATIONALITY / PERMANENT RESIDENCY STATUS

If your trading account is linked to CDP Securities Account 1681-XXXX-XXXX and as the above changes can only be effected by The Central Depository (CDP), please

- a) complete the enclosed SGX "Update Account Particulars" Form
- b) attach Supporting Document/s (refer to SGX Form - Supporting Documents required by CDP)
- c) return to CGS-CIMB for our onward transmission to CDP for the update

If your trading account is linked to CDP Sub-Account 2171-XXXX-XXXX, please update the change in Section 8 of this form.

2. CHANGE EMPLOYMENT

<input type="checkbox"/> Retired	<input type="checkbox"/> Employed	<input type="checkbox"/> Self-Employed	<input type="checkbox"/> Armed Forces Personnel
<input type="checkbox"/> Private Investor	Name of Company		
<input type="checkbox"/> Homemaker	Job Title <small>(applicable for Employed Status)</small>		
<input type="checkbox"/> Unemployed	Country of Employment		
<input type="checkbox"/> Student	Annual Income (SGD)		

3. CHANGE CONTACT DETAILS

Note: If you are an existing I*trade online account holder with a registered 2FA, you can update your Email and Contact details online.

Email Address: _____ Contact No.: _____
(country code / area code / number)

4. UPDATE DETAILS / CANCEL CPF INVESTMENT or SUPPLEMENTARY RETIREMENT SCHEME ("SRS") ACCOUNT

^Please Circle Bank Name

CPF Investment Account No: (^ DBS / OCBC / UOB) _____

SRS Account No: (^ DBS / OCBC / UOB) _____

<input type="checkbox"/> I have <u>closed</u> my CPF Investment Account. Please remove my CPF investment account details from your records.	<input type="checkbox"/> I have <u>closed</u> my SRS Account. Please remove my SRS account details from your records.
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5. CHANGE TRADING REPRESENTATIVE ("TR")

Existing TR's Name/Code: _____ () New TR's Name/Code: _____ ()

Reason for Transfer (mandatory): _____

6. INVALIDATE EXISTING FACILITIES / SERVICES or WITHDRAWAL OF MONIES
Invalidate :
 Electronic Payment for Shares (EPS)

 CIMB Bank GIRO

 E-statement

 Client Investment Profile

 Letter of Authorisation – Trading by Third Party

 Letter of Authorisation – Trading Representative/Third Party
authorisation to collect cheques on behalf

 Others: _____

 Withdrawal of Monies

Amount: _____ Currency: _____

 Credit EPS / Giro Bank Account

 Credit "Direct Credit Service" Bank Account

 Issue a cheque and send to me/us via post (foreign currency)

 Other Instructions: _____

7. CLOSE TRADING ACCOUNT

Trading Account No(s): _____

Reason for Closure: _____

Kindly ensure that all outstanding payments and holdings are cleared.

**8. CHANGE ADDRESS / NAME / IC or PASSPORT NO / NATIONALITY / PERMANENT RESIDENCY STATUS
(applicable only for trading accounts linked to CDP Sub Account 2171-XXXX-XXXX)**

 Name*: _____
(copy of new IC/passport/ROC required)

 IC/Passport No*: _____ Nationality*: _____ Singapore PR*: Yes No
(copy of new IC/passport required) (copy of new IC/passport required) (copy of blue NRIC required)

 Residential/Registered Address: _____

(copy of address proof required [e.g. IC, latest bank statement, utility bill, government body letter])

 Mailing Address: _____
(if differs from residential/registered address)

(copy of address proof required [e.g. IC, latest bank statement, utility bill, government body letter])

***Note:**

- All original documents are to be duly sighted by CGS-CIMB Securities authorised personnel or Notary Public.
- Supporting documents required for Corporate account – Certificate of Change of name, Latest/Updated registry of Company Information print-out

DECLARATION
I/We hereby declare, represent, warrant and agree that all information submitted above are true and accurate in all aspects.

Signature of Main Account Holder/Authorised Signatory

Signature of Joint Account Holder/Authorised Signatory
FOR OFFICIAL USE ONLY

Signature witnessed by / verified against existing records:

Checked by (Contracts Department):

Name of Verifying Officer / Signature / Date

Name of Staff / Signature / Date