

Please indicate below the account(s) you would like to open. Please complete in **BLOCK LETTERS** and '/' or 'x' where applicable

OTHER ACCOUNT INFORMATION

Reason and purpose for opening account at Standard Chartered Bank.

Investment
 Loan Repayment
 Payroll
 Overdraft Facility
 Others: (Please specify) _____

ACCOUNT STATEMENT

Account Statement is to be sent **monthly** and commencing date to be arranged by the Bank, unless specified below:

Other Frequency:
 Daily
 Weekly
 Quarterly
 Others: (Please specify) _____
 Delivery Channel:
 Mail
 E-mail*
 Fax*
 Internet (WebBank)*
 Hold Mail
 Others: (Please specify) _____

* subject to additional terms and conditions

Monthly Consolidated Statement to be delivered:
 Yes
 No

DECLARATION

I/ We declare that I/ we will continue to be bound by the General Account Terms set up in the initial account opening documentation and any amendments thereon.

X

Authorised Signatory
 Name: _____
 Designation: _____
 Date: / /

X

Authorised Signatory
 Name: _____
 Designation: _____
 Date: / /

X

Authorised Signatory
 Name: _____
 Designation: _____
 Date: / /

X

Authorised Signatory
 Name: _____
 Designation: _____
 Date: / /

FOR BANK USE ONLY

Verified by (ARM Name): _____ Signature: _____ Peoplewise ID: _____

Static Data Input By: _____ Validated By: _____