

BOC Credit Card / Express Cash Customer Information Amendment Form

To : BOC Credit Card (International) Ltd.

Fax Number : (852) 2296 7468

Customer Name : _____

Contact No. : _____

BOC Credit Card / Express Cash Account No. : |_|_|_|_| - |_|_|_|_| - |_|_|_|_| - |_|_|_|_|

Please proceed with the followings (please "✓" in the appropriate box)

I. Change Personal Information (The information of all Credit Cards and Express Cash under the same ID/PP No. will be amended.)

- Amend Correspondence Address** (in block letters) [P.O.Box / Oversea address not be accepted]
 - Room/Flat _____ Floor _____ Block _____
 - Name of Building/Estate _____
 - No. & Name of Street _____
 - District _____ ○ Hong Kong ○ Kowloon ○ New Territories
- Update Contact Phone No. / E-mail Address :**
 - Tel : (Home) _____ (Office) _____ (Mobile) _____
 - (Fax) _____ (E-mail Address) _____
- Update Identity Document** (please attach copy)

II. Service Request

- Card Replacement for Credit Card / Express Cash Card due to** (please also return the original credit card which has been cut off):
 - Magnetic Tape Damaged Card Surface Damaged Incorrect Signature Signature Altered
 - Name Changed (please attach copy of Deed Poll & HKID card, acknowledgement of application for HKID card not accepted)
 - Others (please specify) : _____
- Apply for ATM PIN**
(must be signed by main cardholder for applying ATM PIN for additional cardholder)
- Cancel the Reissue ATM Pin Function**
- Cancel Cash Advance Function**
 - ATM and "Jet Payment Service"
 - Bank Counter, "Online Bill Payment Service", "Balance Transfer" & "Cash Before Card Service"
 - Both
- Update Instruction on Receipt of Promotion Material** ("✓" Accept ; "X" Not Accept)
 - Telemarketing Calls Direct Mails SMS Promotion Emails
- Delete Linked Bank Account(s) :**
 - Bank A/C No. : _____ Effective Date : _____ dd/ mm/ yy
 - Bank A/C No. : _____ Effective Date : _____ dd/ mm/ yy
- Cancel Direct Debit Authorization Service :**
 - Bank A/C No. : _____ Effective Date : _____ dd/ mm/ yy
- Account Cancellation** Please return both the main and the additional cards
 - Cancel main card (additional card(s), if any, will be cancelled at the same time)
 - Cancel additional card only - additional card no.: _____
 - Card(s) will be returned with the form (the card(s) must be cut in half please)
 - Unable to return credit card (s) (for security reason, the card(s) must be cut in half on your own please)

Reason(s) for account cancellation: _____

Note : (1) If you have authorized recurrent debit to your card account, please contact the merchant concerned direct to cancel such standing instructions and make such other alternative payment arrangement as you deem fit. (2) Octopus Automatic Add Value Service facility linked to the cancelled card (if any) will be automatically terminated upon card cancellation. Please contact Octopus Cards Limited directly for alternative arrangement. (3) For lost/stolen card, please report by calling 25442222.

- Cancel Priority Pass Card - Priority Pass Card No. :** _____
- Change of Credit Limit to :** _____
 - Permanent (please enclose recent financial/asset proof for permanent credit limit increase application)
 - Temporary (Date From _____ dd/ mm/ yy To _____ dd/ mm/ yy)

- Amend Signature Specimen**
 - Current Signature : _____ New Signature : _____

- Others:** _____

For Bank Use Only (Amend Signature Specimen)	
C/H's identity verified by branch	Authorized Signature

Customer Signature : _____ (Should be the same as that on the application form) **Date :** _____ dd/ mm/ yy

For Card Company Use Only : M A I C _____

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