



FOR THE LOVE OF GIVING



ALL THE PRIVILEGES OF A
UOB SUPPLEMENTARY CARD

BUSINESS REPLY SERVICE
PERMIT NO. 02051



UNITED OVERSEAS BANK LIMITED
UOB CARDS & PAYMENT PRODUCTS
ROBINSON ROAD P.O. BOX 1688
SINGAPORE 903338

Postage will be
paid by addressee.
For posting in
Singapore only.

UOB SUPPLEMENTARY CARDMEMBERSHIP APPLICATION FORM

United Overseas Bank Limited, UOB Cards & Payment Products, Robinson Road, P.O. Box 1688, Singapore 903338
Tel: 1800 222 2121. Website: **uob.com.sg** Co. Reg. No.193500026Z

Applicants must be aged 18 years and above (exceptions made for overseas students).
The first Supplementary Card is complimentary. Supplementary Card is not applicable to Business Cards.

Annual fee for second UOB Supplementary Card (from 3rd year onwards):

UOB PRVI American Express® Card/UOB Visa Signature: S\$100
UOB Visa/MasterCard/JCB/China Unionpay (Preferred Platinum/Lady's Platinum/
JCB Platinum/China Unionpay Platinum/Singtel-UOB Platinum): S\$90
UOB Lady's Classic/One Card: S\$30

DOCUMENTS REQUIRED FROM SUPPLEMENTARY CARD APPLICANT:

Please return this form upon full completion, together with a copy of your Identification Card (both sides) and the following documents.

For Foreigners: A copy of applicant's passport. **For Overseas Students below 21 years old:** Letter of Acceptance from the overseas institution.



FIRST SUPPLEMENTARY CARD First Supplementary Card Free for Life!

Name as in NRIC/Passport/PR* (underline surname) ☐Mr ☐Ms ☐Mrs ☐Mdm ☐Dr

Name to appear on Card, including surname (within 19 spaces)

NRIC/Passport/PR* No. Singaporean/PR Date of Birth (DDMMYY)
Others: _____

Local Home Address House/Blk Unit # —
Street
Postal Code S
Tel Mobile
E-Mail Address

Annual Income Relationship to Principal Applicant

Name of Employer

Position Office Tel

Supplementary Applicant's Signature Date

PRINCIPAL CARDMEMBER

Name of Principal Cardmember

NRIC/PR/Passport* No.

Principal Card No.

Mailing Address

Signature of Principal Cardmember Date

SECOND SUPPLEMENTARY CARD First 2 Years Free!

Name as in NRIC/Passport/PR* (underline surname) ☐Mr ☐Ms ☐Mrs ☐Mdm ☐Dr

Name to appear on Card, including surname (within 19 spaces)

NRIC/Passport/PR* No. Singaporean/PR Date of Birth (DDMMYY)
Others: _____

Local Home Address House/Blk Unit # —
Street
Postal Code S
Tel Mobile
E-Mail Address

Annual Income Relationship to Principal Applicant

Name of Employer

Position Office Tel

Supplementary Applicant's Signature Date

The Principal Cardmember warrants that the above information is true and correct and hereby requests and authorises the issue of the Card(s) as indicated herein: the issue of renewal and replacement Card(s); and the receipt and exchange of credit information with respect to the Principal Cardmember, each Supplementary applicant and his/her account. The Principal Cardmember is responsible for all liabilities (including liabilities incurred by all Supplementary Cards, annual fees or any other fees/charges) and each Supplementary Cardmember is responsible for his/her liabilities incurred in respect to his/her card. The Principal Cardmember and each Supplementary applicant agree to be bound by the terms and conditions accompanying the Card(s) including Supplementary Card(s) and renewal and replacement Card(s) when issued.

* Please delete where appropriate.



FOR BANK USE

Remarks
MU0034/10148 A50

Cr Limit Billing Cycle Decision Rev Code Br/Staff Code

Expiry Card Type Freend Card Fee Offr's Name/ Date Approval Signature