

MAINTENANCE FORM FOR UOB COE OPEN BIDDING SERVICE (CORPORATE / MOTOR TRADER)
MAIN COMPANY PARTICULARS

Company Name:	Business/Company Registration No.:
Address (As in Bank's Record):	Contact Person & Number:

(A) COE TEMPORARY CERTIFICATE MAILING ADDRESS PROFILE (TICK ONLY ONE)

<input type="checkbox"/> Activate COE T-Certification Mailing Address Profile. The mailing addresses are provided in Part (B).
<input type="checkbox"/> De-activate COE T-Certification Mailing Address Profile (if previously activated)

(B) MAILING ADDRESS PROFILES

1. Mailing Address Profile One	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	<input type="checkbox"/> Amend
Short Name (up to 30 characters)			
Name of Location/Receiving Party Mailing Address			
2. Mailing Address Profile Two	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	<input type="checkbox"/> Amend
Short Name (up to 30 characters)			
Name of Location/Receiving Party Mailing Address			
3. Mailing Address Profile Three	<input type="checkbox"/> Add	<input type="checkbox"/> Delete	<input type="checkbox"/> Amend
Short Name (up to 30 characters)			
Name of Location/Receiving Party Mailing Address			

** Delete where inapplicable*

(C) MULTIPLE FOLDER ACCESS (TICK ONLY ONE)

<input type="checkbox"/> Activate Multiple Folder Access. All UOB COE Users within my organisation will have access to each other's bids.
<input type="checkbox"/> De-activate Multiple Folder Access (if previously activated)

AUTHORISATION & AGREEMENT

I/We hereby

- Request for the changes or amendments to my/our UOB Open COE Bidding Service as set out above.
- Agree to be bound by the terms governing the UOB Open COE Bidding Service as may be amended and prevailing from time to time.

 Authorised Signature(s) / Name(s)

 Date

Note: Where applicable, as per mandate in the Company Resolution for the application of UOB Open COE Bidding Service.

FOR BANK USE ONLY

Signature & particulars verified by: _____ Authorised Signature / Branch Stamp Name: Date:	Transaction approved by: _____ Authorised Signature Name: Date:
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