

Tell Us About Yourself

Ethnic Group	<div><div>1.</div><div><input type="checkbox"/></div><div>Chinese</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>Malay</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>Indian</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Others</div></div>
Citizenship	<div><div>1.</div><div><input type="checkbox"/></div><div>Singaporean</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>Permanent Resident</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>Resident</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Non-Resident</div></div>
Housing Type	<div><div>1.</div><div><input type="checkbox"/></div><div>HDB</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>Executive Condominium</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>Landed</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Private Apartment/Condominium</div></div> <div><div>5.</div><div><input type="checkbox"/></div><div>Others</div></div>
Personally Own	<div><div>1.</div><div><input type="checkbox"/></div><div>Credit Card</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>Home</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>Fitness/ Health Club Membership</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Country Club Membership</div></div> <div><div>5.</div><div><input type="checkbox"/></div><div>Car</div></div>
Education Level	<div><div>1.</div><div><input type="checkbox"/></div><div>Primary</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>Secondary</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>Pre-University</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Diploma</div></div> <div><div>5.</div><div><input type="checkbox"/></div><div>Degree</div></div> <div><div>6.</div><div><input type="checkbox"/></div><div>Post Graduate Degree</div></div> <div><div>7.</div><div><input type="checkbox"/></div><div>Others</div></div>
Number of Children	<div><div>[</div><div><input type="text"/></div><div>]</div></div>
Occupation	<div><div>1.</div><div><input type="checkbox"/></div><div>Professional</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>Business Person</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>Manager/Director</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Executive</div></div> <div><div>5.</div><div><input type="checkbox"/></div><div>Secretary/Adminstrative Asst</div></div> <div><div>6.</div><div><input type="checkbox"/></div><div>Student</div></div> <div><div>7.</div><div><input type="checkbox"/></div><div>Homemaker</div></div> <div><div>8.</div><div><input type="checkbox"/></div><div>Others</div></div>
Income	<div><div>1.</div><div><input type="checkbox"/></div><div>No income</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>S\$2,000 or below</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>Over S\$2,000 – S\$3,000</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Over S\$3,000 – S\$5,000</div></div> <div><div>5.</div><div><input type="checkbox"/></div><div>Over S\$5,000 – S\$8,000</div></div> <div><div>6.</div><div><input type="checkbox"/></div><div>Over S\$8,000</div></div>
Information Sources	<div><div>1.</div><div><input type="checkbox"/></div><div>Newspaper</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>Television</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>Radio</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Magazines</div></div> <div><div>5.</div><div><input type="checkbox"/></div><div>Direct Mail/Newsletters/Flyers</div></div> <div><div>6.</div><div><input type="checkbox"/></div><div>Internet</div></div> <div><div>7.</div><div><input type="checkbox"/></div><div>Friends/Relatives</div></div> <div><div>8.</div><div><input type="checkbox"/></div><div>Posters/Billboards</div></div> <div><div>9.</div><div><input type="checkbox"/></div><div>Others</div></div>
Shopping	<div><div>1.</div><div><input type="checkbox"/></div><div>Daily</div></div> <div><div>2.</div><div><input type="checkbox"/></div><div>1–3 times a week</div></div> <div><div>3.</div><div><input type="checkbox"/></div><div>4–6 times a week</div></div> <div><div>4.</div><div><input type="checkbox"/></div><div>Not at all</div></div>

Please fax the completed application form to 6356 8841.

Existing UOB Principal Cardholders only need to complete 1, 3, 6 and sign under 7. For CashPlus, please complete all the fields in sections 1, 2, 3, 4 and sign under 6. Please submit all required documents stated in section 6.

1. YOUR PERSONAL PARTICULARS											
Name as in NRIC/Passport/PR* (underline surname) <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Mdm <input type="checkbox"/> Dr											
Name to appear on Card, including surname (within 19 spaces)											
<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>											
Metro Card No. (if applicable, fill in either personal or supplementary card applicant's no:)* <div><div>1</div><div>1</div><div>0</div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> *Your Metro Card will cease upon approval of the credit card.											
NRIC/Passport/PR* No. <small>For Singaporean, please provide NRIC no. only</small>				Nationality Singaporean / PR Others: _____				Date of Birth Day Mth Yr			
Highest Educational Qualification				Marital Status Married / Single Others: _____				Race		Sex M / F	
Bill To: <input type="checkbox"/> Home <input type="checkbox"/> Office				Employment Pass Expiry Date							
Local Home Address: House/Blk								Unit #			–
Street											
								Postal Code	S		
Tel 6								Mobile#			
								No. of Dependents			
E-Mail Address											
Residential Status: <input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged <input type="checkbox"/> Parent's <input type="checkbox"/> Rental S\$_____per month Residential Type: <input type="checkbox"/> HDB-3Rm/4Rm <input type="checkbox"/> HDB-5Rm/Executive Apartment <input type="checkbox"/> Executive Condo/HUDC <input type="checkbox"/> Private Apartment/Condominium <input type="checkbox"/> Terrace <input type="checkbox"/> Semi-Detached <input type="checkbox"/> Bungalow Years There _____ Months There _____											
2. YOUR WORKPLACE											
Name of Employer/Business* <input type="checkbox"/> Tick here if self-employed											
Office Address:											
Postal Code S											
Type of Business (please tick one) PU <input type="checkbox"/> Government RT <input type="checkbox"/> Retail Trade BU <input type="checkbox"/> Engineering FI <input type="checkbox"/> Financial Services TR <input type="checkbox"/> Transportation BU <input type="checkbox"/> Business Consultancy CO <input type="checkbox"/> Construction IN <input type="checkbox"/> Insurance BU <input type="checkbox"/> Real Estate CI <input type="checkbox"/> Computer & IT PR <input type="checkbox"/> Professional Services ED <input type="checkbox"/> Education Services MF <input type="checkbox"/> Manufacturing HO <input type="checkbox"/> Hotel Others (please indicate) <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>											
Occupation (please tick one) OP/AD <input type="checkbox"/> Administrative Executive EX/EX <input type="checkbox"/> Executive/Officer/Associate OP/SS <input type="checkbox"/> Sales Executive/Sales Assistant MG/DR <input type="checkbox"/> Director/Managing Director PF/FC <input type="checkbox"/> Financial Controller/Auditors TS/TE <input type="checkbox"/> Technicians TS/EN <input type="checkbox"/> Engineer/Engineer Assistant EX/MK <input type="checkbox"/> Marketing Executive MG/MG <input type="checkbox"/> Managers TS/EU <input type="checkbox"/> Teacher/Principal PF/PF <input type="checkbox"/> Licensed Professional SE/SD <input type="checkbox"/> Self-employed Directors/ Sole Proprietor/Partners Others (please indicate) <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>											
Contact No. 6								Years There			
Basic Monthly Income				Annual Gross Income				Other Income			
Source(s) and Amount(s) of Any Other Income								Online CPF-Statement Submission <input type="checkbox"/> Yes <input type="checkbox"/> No			
If current employment is less than 3 years, please fill up the previous employer Name of Previous Employer											
Occupation				Type of Business				Years There			

IMPORTANT: To apply, Principal Applicant must be aged 21 years and above and Supplementary Applicant must be 18 years old and above, For Singapore Citizens and Permanent Residents: Minimum qualifying income for Metro-UOB Gold Card is S\$30,000 p.a. For foreigners: S\$60,000 p.a If you do not meet the income requirement for the Metro-UOB Gold Card, a minimum fixed deposit of S\$10,000 is required as collateral. **ANNUAL CARD FEE** (inclusive of GST) for Metro UOB Gold is S\$50 for Main Card and S\$25 for Supplementary Card. **DOCUMENTS REQUIRED:** Please return this form upon full completion, together with a copy of both the Principal and Supplementary Applicants' Identification Cards (both sides) and with the following documents. For Employees: Latest IR8A Form, last 6 months' original CPF statements or computerised payslips for the past 3 months. For Self-employed: Copies of the past 2 years' Income Tax Assessment Forms and last 3 months' bank statements. For Foreigners: In addition to the above, a copy of your valid Employment Pass and Passport. If you are an existing UOB cardmember, you just need to complete the application form and mail it back to us. However, you might wish to furnish us with your income documents if you would like to have your credit limit updated or had a change of employment. **NOTE:** If you are already an existing UOB Phone Banking customer, your UOB Credit Card account will be linked to your current Access Code and PIN. If you are not an existing UOB Phone Banking customer, a new Access Code and PIN will be sent to you upon approval of your UOB Credit Card application.

3. YOUR CREDIT REFERENCES											
Are you an existing UOB Customer? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Credit Card(s) Presently Held: <input type="checkbox"/> UOB <input type="checkbox"/> Citibank <input type="checkbox"/> DBS <input type="checkbox"/> Standard Chartered <input type="checkbox"/> HSBC <input type="checkbox"/> OCBC <input type="checkbox"/> Amex <input type="checkbox"/> Others, please specify _____ <input type="checkbox"/> None											
4. YOUR FAMILY											
Mother's Maiden Name (for emergency identification purposes)											
Spouse's Name as in NRIC/Passport/PR* NRIC/Passport/PR* No.											
Name of Relative or Friend not staying with you				Relationship				Tel <div><div></div><div></div><div></div><div></div><div></div><div></div></div>			
5. SUPPLEMENTARY CARD APPLICATION											
Name as in NRIC/Passport/PR* (underline surname) <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Mdm <input type="checkbox"/> Dr											
Name to appear on Card, including surname (within 19 spaces)											
<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>											
NRIC/Passport/PR* No. <small>For Singaporean, please provide NRIC no. only</small>				Nationality Singaporean / PR Others: _____				Date of Birth Day Mth Yr			
Home Address:				House/Blk				Unit #			–
Street											
								Postal Code	S		
Tel 6				Mobile				Race		Sex M / F	
E-Mail Address											
Annual Income						Relationship to Principal Applicant					

6. YOUR UOB CASHPLUS <div>1 YEAR FEE WAIVER</div>				
<input checked="" type="checkbox"/> Yes! I want to enjoy UOB CashPlus* with a 1-year fee waiver.				
Eligibility: Principal Cardmembers only. Applicants must be citizens or permanent residents of Singapore aged between 21 and 55, earning a minimum income of S\$30,000. Mandatory Documents: A copy of NRIC (front & back) and the following documents: For Salaried employees – Latest computerized payslips, last 6 months' CPF Statements or latest income tax notice of assessment. For Commission based employees or self-employed – Last 2 years' income tax notice of assessment.				
* Approval is subject to bank's discretion and for new UOB CashPlus customer only.				Applicant's Signature 0502CRF
7. DECLARATION OF APPLICANT(S) (IMPORTANT-PLEASE READ BEFORE SIGNING)				
<div>1. I/we hereby agree and represent to the Bank that:- (a) the particulars and information furnished by me/us herein and in all documents are true and accurate. The Bank is hereby irrevocably and unconditionally authorised by me/us to contact any person to obtain and/or verify any information required by the Bank, to retain all documents submitted by me/us, and to disclose all such information relating to me/us or the Card(s) account(s) to any person as you deem fit including but without limitation the Consumer Credit Bureau, I/we undertake that in the event any information becomes inaccurate or misleading or changed in any way whether before this application is approved or whilst the Facility is outstanding. I/we shall promptly notify the Bank of any such changes; and (b) at the time of this application, I/we am/are not an undischarged bankrupt and there has been no statutory demand served on me/us nor legal proceedings commenced against me/us; and 2. I/we consent and authorise the Bank to communicate with me/us with respect to this application by electronic mail or any other means the Bank may deem appropriate at my/our address set out in this application. Without prejudice to the aforesaid, I/we authorise you to send the Card(s), personal identification number, all statements of account, and other communications to the Principal Card applicant by ordinary mail at his sole risk or allow the same to be collected by the Principal Card applicant 3. In respect of the Card: a) I/we request you to issue the Card(s) applied for by me/us and to continue to renew and replace it/them until such time as the Card account(s) are terminated; and b) I/we agree that 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 of his/her Card; c) I/we agree that approval of this application is at the Bank's sole discretion, and the Bank is entitled to reject the application without assigning reason or notice to me/us; and d) I/we understand that the Terms and Conditions of the UOB Cardmember Agreement, will be sent with the Card(s) and I/we agree to be bound by such Terms and Conditions upon receipt or acceptance of or signing on or use of the Card(s) unless you have received my/our return of the Card(s) cut into two half. 4. Where I have applied for the UOB CashPlus Facility, I hereby unconditionally agree to be bound by the following terms and conditions/agreement: (a) Terms & Conditions Governing UOB CashPlus (b) Terms and Conditions Governing Accounts and Services (c) Additional Terms and Conditions Governing Accounts and Services (d) Terms and Conditions of UOB Personal Internet Banking Access. I understand that: the copies of the terms and conditions numbered 4(a) to 4(c) above are available for my inspection at any UOB branch; that copies thereof will be sent to me upon Bank's approval of my application; and that I may view the agreement numbered 4(d) above on the Bank's website at www.uobgroup.com. I agree that upon my receipt or acceptance or signing on or use of the UOB CashPlus facility unless the Bank has received my return of the UOB ATM card cut in half, will constitute my/our agreement to be bound by all Terms and Conditions/Agreement stated in this paragraph 4. In the event that my UOB CashPlus account is closed or terminated for whatever reasons within 12 months from the date of account opening of the UOB CashPlus account, I agree that the Bank is entitled to claim from me the amount equivalent to the price of any welcome gifts which the Bank has given to me upon approval of my application. I hereby authorise the bank to debit my UOB CashPlus account for the amount equivalent to the price of such gifts as determined by the Bank. 5. I/we irrevocably and unconditionally agree to be bound by the Terms & Conditions of UOB Personal Internet Banking Access.</div>				
Principal Applicant's Signature/Date				Supplementary Applicant's Signature/Date
FOR BANK USE				
Remark				CU0037/20089
Bankwide CIF Number				
Credit Limit	Census	Billing Cycle	Industrial Code	Occupation Code
Type of Residence	Branch Staff Code	Card Org 001	Freend	Card Fee Date
Review Code	Monitor Code	Expiry Date	Card Type 424	Officer Code
Approval Code			Officer Name	Approval Name

* Please delete where appropriate.
* The Mobile phone number will be used for the purpose of UOB Personal Internet Banking One-Time Password (SMS-OTP).
The provision of this application form does not automatically indicate that United Overseas Bank Limited will accept the contents and issue a Credit Card. United Overseas Bank Limited reserves the right to reject the application without assigning any reason whatsoever.

Please send us your application with this prepaid business reply folder

1. Fold along the dotted line.
2. Fold and insert your application form and other required document into this prepaid business reply folder.
3. Seal along the edges of this prepaid business reply folder with clear tape (do not staple)
4. Drop your sealed prepaid business reply folder into your nearest post box.

BUSINESS REPLY SERVICE
PERMIT NO. 02051



UNITED OVERSEAS BANK LIMITED

UOB CARD CENTRE
ROBINSON ROAD P.O. BOX 1688
SINGAPORE 903338

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