

# UOB PREFERRED PLATINUM SUPPLEMENTARY CARD FORM



United Overseas Bank Limited  
UOB Cards & Payment Products, Robinson Road, P.O. Box 1688, Singapore 903338.  
Tel: 1800 355 1212 Company Reg No. 193500026Z



Please tick one ☐ VISA ☐ MasterCard

Applicants must be aged 18 years and above (exceptions made for overseas students). The first Supplementary Card is free for life. The second Supplementary Card enjoys a waiver on the first year annual fee and is subject to an annual supplementary card fee of S\$90 per annum from the second year onwards.

## FIRST SUPPLEMENTARY CARD (FREE FOR LIFE)

Full name as in NRIC/Passport (underline surname) ☐ Mr ☐ Ms ☐ Mrs ☐ Mdm ☐ Dr

\_\_\_\_\_  
Name to appear on Card (within 19 spaces)

NRIC/PR/Passport\* No. \_\_\_\_\_ Nationality \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

Date of Birth \_\_\_\_\_ Day \_\_\_\_\_ Mth \_\_\_\_\_ Yr \_\_\_\_\_ Tel \_\_\_\_\_ Hp \_\_\_\_\_

E-mail Address \_\_\_\_\_ Annual Income \_\_\_\_\_ Relationship to Principal Applicant \_\_\_\_\_

For NETS and ATM link to your UOB Group account(s) please provide your personal account number(s):

Current Account     -     -     -  Savings Account     -     -     -

Language Choice ☐ English ☐ Chinese

(X) \_\_\_\_\_

Supplementary Applicant's Signature/Date

## SECOND SUPPLEMENTARY CARD

Full name as in NRIC/Passport (underline surname) ☐ Mr ☐ Ms ☐ Mrs ☐ Mdm ☐ Dr

\_\_\_\_\_  
Name to appear on Card (within 19 spaces)

NRIC/PR/Passport\* No. \_\_\_\_\_ Nationality \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

Date of Birth \_\_\_\_\_ Day \_\_\_\_\_ Mth \_\_\_\_\_ Yr \_\_\_\_\_ Tel \_\_\_\_\_ Hp \_\_\_\_\_

E-mail Address \_\_\_\_\_ Annual Income \_\_\_\_\_ Relationship to Principal Applicant \_\_\_\_\_

For NETS and ATM link to your UOB Group account(s) please provide your personal account number(s):

Current Account     -     -     -  Savings Account     -     -     -

Language Choice ☐ English ☐ Chinese

(X) \_\_\_\_\_

Supplementary Applicant's Signature/Date

## PRINCIPAL CARDMEMBER'S DETAILS

Name of Principal Cardmember \_\_\_\_\_ NRIC/PR/Passport\* No. \_\_\_\_\_

Principal Card No     -     -     -     -

(X) \_\_\_\_\_

Principal Cardmember's Signature/Date

Cr Limit	Billing Cycle	Decision	Offr's Name/Date	Approval Signature
Ind Code	Occ Code	Monitor Code	Rev. Code	Br/Staff Code
Expiry	Freend	Card Fee	Remarks	

The Principal Cardmember warrants that the above information is true and correct and hereby requests and authorizes 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.