

# UOB TIGER AIRWAYS VISA GOLD CARDMEMBERSHIP APPLICATION FORM



United Overseas Bank Limited  
Tel: 1800 2222 121. Fax: 6356 6266, 63531181.  
Website: [www.uobgroup.com](http://www.uobgroup.com).  
Company Reg. No. 193500026Z

**APPLY NOW AND ENJOY  
1-YEAR WAIVER ON YOUR  
MEMBERSHIP FEE.**

Existing UOB Principal Cardholders only need to complete 1, 2 and sign under 11. For your convenience, no income documents will be required. If you have had a change of employment, please complete 7 and attach your updated income documents.

For CashPlus, please complete all the fields in sections 1, 2, 3, 7 and signed under 11. Please submit all required documents stated in section 10.

TICK ONE:

☐ Secured Card (application with Fixed deposit pledge) ☐ Unsecured Card (application with income documents)

1. PLEASE TELL US ABOUT YOURSELF																																							
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 (within 19 spaces)																																							
<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																							
NRIC/Passport/PR* No.										Nationality					Date of Birth																								
															Day		Mth		Yr																				
Highest Educational Qualification										Race					Marital Status					Sex																			
Local Home Address:					House/Blk					Unit #					-																								
Street																																							
										Postal Code					S																								
Tel					Hp #										No. of Dependents																								
E-Mail Address (Compulsory for communication of travel promotions)																																							
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 _____																													
Bill To: <input type="checkbox"/> Home <input type="checkbox"/> Office										Employment Pass Expiry Date																													
2. YOUR CREDIT REFERENCES																																							
Are you a 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																																							
3. 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																								
4. FREQUENT FLYER REGISTRATION																																							
<input type="checkbox"/> Yes, please link my UOB Credit Card account to my Frequent Flyer membership for future conversion of US\$ to Frequent Flyer miles.																																							
My KrisFlyer Membership No.										[ ] [ ] [ ] - [ ] [ ] [ ] - [ ] [ ] [ ]																													
My Asia Miles Membership No.										[ ] [ ] [ ] - [ ] [ ] [ ] - [ ] [ ] [ ]																													
A S\$10 conversion fee will be charged to your Card for each conversion of US\$ to Frequent Flyer Miles.																																							
5. CARD PIN REQUEST																																							
<input type="checkbox"/> Yes, I would like to request for a Card PIN which will allow me to obtain cash advances from ATMs locally and worldwide with my Credit Card.																																							
6. UOB GROUP ACCOUNT LINKAGE																																							
<input type="checkbox"/> Yes, I would like to access my UOB Group account(s), including NETS payments with my Credit Card.																																							
UOB Current Account No.										[ ] [ ] [ ] - [ ] [ ] [ ] - [ ] [ ] [ ] - [ ]																													
UOB Savings Account No.										[ ] [ ] [ ] - [ ] [ ] [ ] - [ ] [ ] [ ] - [ ]																													

**IMPORTANT:** For Singapore Citizens and Permanent Residents: Minimum income for Gold Card is S\$30,000 p.a. For Foreigners: S\$80,000 p.a. is required.

**ANNUAL CARD FEE (inclusive of GST)** Principal card: S\$125 p.a. 1st Supplementary card: FREE! 2nd Supplementary card: S\$78 p.a.

**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.

**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.

**UOB Personal Internet Banking:** A Username and Password will be mailed to you. This gives you access to your Card account information online. If you are an existing UOB Personal Internet Banking customer, your Credit Card account will be automatically linked to your existing username.

7. YOUR WORKPLACE																					
Name of Employer/Business* <input type="checkbox"/> Tick here if self-employed																					
Office Address																					
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]																					
															Postal Code					S	
Telephone & Ext.															Years There						
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)																					
Occupation (please tick one)																					
OP/AD <input type="checkbox"/> Administrative Executive					EX/MK <input type="checkbox"/> Marketing Executive																
MG/DR <input type="checkbox"/> Director/Managing Director					PF/PF <input type="checkbox"/> Licensed Professional																
TS/EN <input type="checkbox"/> Engineer/Engineering Assistant					OP/SS <input type="checkbox"/> Sales Executive/Sales Assistant																
TS/EU <input type="checkbox"/> Teacher/Principal					TS/TE <input type="checkbox"/> Technicians																
EX/EX <input type="checkbox"/> Executive/Officer/Associate					MG/MG <input type="checkbox"/> Managers																
PF/FC <input type="checkbox"/> Financial Controller/Auditors					SE/SD <input type="checkbox"/> Self-employed Directors/ Sole Proprietor/Partners																
Others (please indicate)																					
Basic Monthly Income										Annual Gross Income											
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 this portion:																					
Name of Previous Employer										Years There											
8. 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 (within 19 spaces)																					
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]																					
NRIC/Passport/PR* No.										Nationality					Date of Birth						
															Day		Mth		Yr		
Tel					Hp					Sex					Race						
E-Mail Address																					
Annual Income										Relationship to Principal Applicant											
9. CREDITSHIELD																					
<input type="checkbox"/> Yes, I wish to enrol in UOB CreditShield for just S\$0.23 a month for every S\$100 (or any part thereof) in my monthly outstanding UOB Credit Card balance. No premium will be charged if the balance is zero.																					
I declare that I am under 60 years of age and that I have not been hospitalised in the last 12 months nor suffered from any physical defects, injuries or impairments, and that I am in good health. I agree to be bound by the terms and conditions of the policy to be issued. Pursuant to Section 25(5) of the Insurance Act (Cap142), you are to disclose, fully and faithfully, all the facts as you know them or ought to know them. Failure to do so may render the policy issued void.																					
Signature _____																					



UOB TIGER AIRWAYS VISA GOLD

10. YOUR UOB CASHPLUS			
<b>Yes! I want to enjoy UOB CashPlus* with a 1-year fee waiver.</b>			
<b>Eligibility:</b> Principal Cardholders only. Applicants must be citizens or permanent residents of Singapore aged between 21 and 55, earning a minimum income of \$30,000.			
<b>Mandatory Documents:</b> 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.			
<input type="checkbox"/> No, I do not want to enjoy UOB CashPlus. (Tick here if you do not want to enjoy CashPlus)			
11. DECLARATION OF APPLICANT(S) (IMPORTANT: PLEASE READ BEFORE SIGNING)			
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.			
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 or signing on or use of the Card(s) unless you have received my/our return of the Card(s) cut into 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 and 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 the Bank's approval of my application; and that I may view the agreement numbered 4(d) above on the Bank's website at <a href="http://www.uobgroup.com">www.uobgroup.com</a> . 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 gift 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 gift 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.			
Principal Applicant's Signature/Date		Supplementary Applicant's Signature/Date	
FOR BANK USE			
Remark		CU0031/CS0031/20048	
Bankwide CIF Number	Country Code	Identity Type	
Credit Limit	Census	Billing Cycle	Industrial Code
Type of Residence	Branch Staff Code	Freend	Card Fee Date
Review Code	Monitor Code	Expiry Date	Card Type
Approval Code	CreditShield	Officer Name	Approval Name

Please delete wherever 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 UOB Card. United Overseas Bank Limited reserves the right to reject the application without assigning any reason whatsoever.