

# CONTACT DETAILS UPDATE FORM

**Note:** The information provided on this form will be updated for all of your products with Standard Chartered Bank UAE  
- For **Name** change request please visit our branch with your **Original** Passport.  
- Standard Chartered Bank reserves the right to perform additional verification(s) prior to processing the instruction. Failure of any of the verification will result in rejection of instruction.  
- Please strike off unused portions of this form.

## CLIENT INFORMATION

**Account No:** (Any one account if you have multiple accounts) **Credit Card Number:** (Any one Card if you have multiple Cards)

**Account Name/Title:** \_\_\_\_\_  
First Middle Last

Please complete **ONLY** the relevant sections of the form in **BLOCK** letters

## NAME CHANGE

New Name: Mr./Ms/Mrs. \_\_\_\_\_  
First Middle Last

New Passport Number: \_\_\_\_\_

## ADDRESS CHANGE

**Note:** The new address provided for (any of) the selected address fields will be updated and will override the existing information in our records.

Please tick the address field(s) you want to update

Office Address: \_\_\_\_\_

P.O. Box/ Zip Code: \_\_\_\_\_ Emirate/City: \_\_\_\_\_

Country: \_\_\_\_\_ Landmark: \_\_\_\_\_

Residence: \_\_\_\_\_

P.O. Box/ Zip Code: \_\_\_\_\_ Emirate/City: \_\_\_\_\_

Country: \_\_\_\_\_ Landmark: \_\_\_\_\_

Home Country Address: (For expats only) \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_ Landmark: \_\_\_\_\_

Permanent Address: (For expats only, If different from home country address) \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_ Landmark: \_\_\_\_\_

**Note:** To update your mailing address, please select one of the options below. Please note that the option selected will be updated as per the corresponding address provided above.

Preferred Mailing Address:  Office  Residence  Home Country  Permanent

**Note: The Bank will send all communication to your mailing address**

## EMAIL ID CHANGE

**Note:** The new email ID provided for (any of) the selected field(s) will be updated and will override the existing information in our records.

Please tick the Email ID (s) you want to update

New Email ID - Primary: **Note:** If you have signed up for e-statements, you will only receive them on the primary email id.

\_\_\_\_\_

New Email ID -Secondary : **(Optional)**

\_\_\_\_\_

## CONTACT NUMBER(S) CHANGE

**Note:** The new contact numbers given for (any of) the selected categorie(s) will be updated and will override the existing information in our records:

Please tick the contact number field(s) you want to update

Categories	New Numbers														
	Country Code	Area Code	Phone Number												
<input type="checkbox"/> Office															
<input type="checkbox"/> Residence															
<input type="checkbox"/> Primary Mobile															
<input type="checkbox"/> Secondary Mobile (Optional)															
<input type="checkbox"/> Home Country															

**All communications will be sent to your primary mobile number**

Please tick if you are changing all contact numbers

Reason for change: \_\_\_\_\_

All parties updating their signatures hereby undertake and confirm that all active (Direct Debit Authority) DDAs existing on the above account can continue to be presented. I/We have no objection to allow for such DDAs to remain active, based on the existing mandate held with Standard Chartered Bank. I/We, the undersigned, hereby irrevocably and unconditionally undertake to indemnify Standard Chartered Bank UAE and its representatives, employees, officers, successors, advisors and agents and shall keep Standard Chartered Bank UAE and its representatives, employees, officers, successors, advisors and agents held harmless against any and all demands, civil suits, claims, losses, damages, complaints and/or expenses (inclusive of court and advocacy fees) whatsoever arising as a result of the active DDAs and/or the mandate being amended.

## Signatures of Account Holder(s)

Signature of Account Holder(s) as per the Bank's Mandate

Date

## FOR BANK USE ONLY

Request submitted by:  In person  Mail

ID Type:  Passport  Drivers License  Labor Card  Emirates ID

ID Self Attested:  Yes  No  NA

OSV Done:  Yes  No  NA Detica check (in case of name change):  Yes  No  NA

Bank Staff Name

Signature Verifier Name

Bank Staff Signature & Stamp

Signature Verified Signature & Stamp