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 <u>Name</u> 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 ac		Credit Card Number: (Any one Card if you have multiple Cards Credit Card Name (As embossed on your card):
First Middle	Last	
	the relevant sections	s of the form in BLOCK letters
NAME CHANGE		
New Name: Mr./Ms/MrsFirst	Mi	iddle Last
New Passport Number:		
ADDRESS CHANGE		
Note: The new address provided for (any of) the select records.	red address fields wi	Il be updated and will override the existing information in our
☑ 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	om home country ac	ddress)
Street:	_ City:	
Country:	_ Landmark:	
Note: To update your mailing address, please select as per the corresponding address provided above.	ct one of the options	below. Please note that the option selected will be updated
Preferred Mailing Address: Office	Residence	Home Country Permanent
Note: The Bank will send all communication to y	our mailing addres	<u>ss</u>



EMAIL ID CHANGE																			
Note: The new email ID provide	ded for lany	of) the sel	lected field	d(s) will be	e undata	ed and	d will c	overrid	e the	exict	ina in	format	tion in	Our r	ecord	S			
✓ Please tick the Email ID (s)	, ,	,	iccted liei	u(3) WIII DO	συρααιο	o and	a vviii C	Verria	C ti ic	CAIST	ii ig ii i	ЮППа		oui it	SCOIG	٥.			
New Email ID - Primary: New Em	ote: If you ha	ave signe	d up for e	-statemer	nts, you	will or	nly rec	eive th	nem d	on the	prim	ary er	nail id						
New Email ID -Secondary	(Optional)																		
CONTACT NUMBER(S) C	HANGE																		
Note: The new contact numb	ers given for	(any of) t	he selecte	ed catego	rie(s) wil	l be u	pdate	d and	will c	verric	de the	existi	ng inf	ormat	ion in	our			
records:																			
✓ Please tick the contact	number fiel	a(s) you	want to	update	Ne	w Nu	ımber	rs .											
Categories	Country	y Code	Area	Code		Phone Num								nber					
Office																			
Residence																			
Primary Mobile																			
Secondary Mobile (Optional	al)																		
☐ Home Country																			
All communications will be	sent to you	ur primaı	ry mobile	number	'														
☐ Please tick if you are char	nging all cont	tact numb	pers																
Reason for change:																			
All parties updating their signal can continue to be presented. ard Chartered Bank. I/We, the and its representatives, emprepresentatives, employees, cdamages, complaints and/or mandate being amended.	I/We have not be undersigned alloyees, officers, succ	o objectioned, hereby eers, successors, a	n to allow y irrevoca cessors, a dvisors ar	ofor such I ably and u advisors a and agents	DDAs to nconditi and age held ha	remai onally nts a rmles	in activunde nd sh s agai	ve, ba rtake nall ke nst an	sed o to inc ep S y and	n the demni tanda I all de	existi fy Sta Ird Cl eman	ng ma andard harter ds, civ	ndate I Cha ed Ba il suit	held votered ank U. s, clai	with S Bank AE ai ms, lo	Stand- K UAE			
Signatures of Account Hole	dor(s)																		
oignatures of Account flow	uei (3)																		
Signature of Account Holder	(s) as per th	e Bank's	Mandate)				Da	ate										
FOR BANK USE ONLY																			
Request submitted by:	person	Mail																	
ID Type:	assport	☐ Drive	ers Licens	se Labo	r Card		Emira	ites ID											
ID Self Attested: Yes	es	□No		□NA															
OSV Done:		□No		□NA	Det	ica ch	neck (i	n case	e of na	ame (chanc	ae): □	Yes	□No	o □1	NA			
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Bank Staff Name			Sign	ature Veri	fier Nam	ie			_										
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Bank Staff Signature & Stamp)		Sign	ature Veri	fied Sigr	nature	& Sta	amp											