

GENERAL BANKING

CORPORATE
ACCOUNT
APPLICATION
FORM
(EXISTING CLIENTS)



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CORPORATE ACCOUNT APPLICATION FORM

FOR EXISTING CLIENTS

Please complete all sections in Block Letters and mark "✓" where applicable

1 | TYPE OF ACCOUNT

I/ We wish to open the following account(s) in the same name(s) and signing mandate as per my/our existing account number.

Existing HL Bank Account No.:

New Account Type (Additional Account to be Opened):

Current Account

SGD

HL Premier Eight Account

SGD

USD

Call Account

USD

Others: _____

Fixed Deposit Account

SGD

USD

Others: _____

2 | BUSINESS PARTICULARS

Registered Name of Business:

UEN/ Registration Number:

Account Name
(if different from registered name):

3 | AUTHORISED CONTACT PERSONNEL

All Authorised Contacts will follow as per Existing Accounts

I/We would like to opt-in for paper statement

Effective from the date hereof, I/we, the approving person(s) of these Account(s) maintained with HL Bank Singapore hereby irrevocably and unconditionally authorise the Bank (without the Bank being obliged) to receive and communicate account information ("Communication") given from/ with or purporting to be from/with the Authorised Contact Personnel appointed, with or without separate independent verification by the Bank's officers as to the genuineness of such Communication, so long as the Bank's officers receiving or acting on such Communication believed the Communication to be genuine at the time it was given. I/We shall be bound by any acts or omissions taken by the Bank in reliance on such Communication, regardless whether such Communication has been given by me/ us or with my/our authority or consent and regardless whether such Communication is forged, fraudulent, ambiguous or misunderstood, provided that the Bank's officers receiving or acting on such Communication believed the Communication to be genuine at the time it was given.

This authority shall take immediate effect and continue to be in force until I/we have expressly revoked it by notice in writing delivered to you. I/We undertake to keep HL Bank Singapore informed of any change to the particulars of the Authorised Contact Personnel provided in this form. The Bank will not be held responsible in any manner for my/our failure to notify the Bank of such change.

The personnel whose information appear(s) in the Authorised Contact Personnel to Receive and Communicate Account Information section in this form shall at any time be authorised to perform and effect the following services for and on my/our behalf of me/us:

- Account balance enquiry • Account number enquiry
- Account statement request • Transaction status enquiry
- Account fee waiver enquiry/request

I/We confirm that the abovementioned Authorised Contact Personnel appointed has/have sufficient authority to receive and communicate account information stipulated in this form for and on my/our behalf and all such Communication shall be binding and conclusive on me/us.

4 | CRS / FATCA DECLARATION

Please mark "✓" in the boxes below if there is no change in circumstances since the last declaration. Otherwise, please furnish a fresh declaration.

I/We confirm that the last CRS declaration submitted to the Bank remains in force and has not been superseded.

I/We confirm that the last FATCA declaration submitted to the Bank remains in force and has not been superseded.

5 | DEPOSIT INSURANCE SCHEME

Singapore dollar deposits of non-bank depositors are insured by the Singapore Deposit Insurance Corporation, for up to S\$100,000 in aggregate per depositor per Scheme member by law. Foreign currency deposits, dual currency investments, structured deposits and other investment products are not insured.

The Bank's General Banking Standard Terms and Conditions Governing Accounts ("the **Terms and Conditions**") governs the operation of the Account(s) selected. A copy of the Terms and Conditions is enclosed.

The collection, use and disclosure of Customer Data and the Personal Data of each Account Holder provided in this Corporate Account Application Form will be governed by the Terms and Conditions. Please also refer to the Bank's Privacy Policy found on the Bank's website.



6 | DECLARATIONS

To be Signed by Authorised Signatory(ies)

I/ We confirm that I/we have read and understood the Bank's Terms and Conditions including the Bank's Privacy Policy and agree to abide and be bound by these terms and conditions.

This application form (the "Application") is supplemental and additional to the Corporate Account Application Form (New Clients) (the "Account Opening Form") previously submitted to the Bank. This Application shall be read together with the Account Opening Form and shall be considered an integral part of the Account Opening Form.

By signing this Application,

I/We confirm there are no changes to our existing signing mandate.

I/We confirm there are no changes to the information and/or particulars previously disclosed.

I/We hereby append my/our ACRA Business Profile.

I/We confirm that all documents submitted to the Bank including without limitation my/our Memorandum and Articles of Association and all resolutions remain in full force and effect without amendment.

All documents submitted, and declarations and consents provided, in relation to the Account Opening Form are deemed to be repeated herein with reference to the facts and circumstances subsisting as of the date hereof.

I/We hereby confirm that the Board Resolution dated _____ furnished to the Bank remains in force and has not been superseded.

.....

Name:

NRIC/ Passport No.:

Designation:

Date:

.....

Name:

NRIC/ Passport No.:

Designation:

Date:

For a partnership, all partners are required to sign.

For Bank Use Only	
Attended by: Date:	Verified by: Date: