



CHANGE OF ADDRESS AND CONTACT DETAILS FORM

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|---|----------------------------------|---|
| Name(s) as per NRIC / Passport: | NRIC(s) / Passport Number(s): | Customer Number(s): |
| New Mailing and Home Address update as follows. This update will supersede existing record. *Mailing Address refers to Primary Address ** Home Address refers to your current place of residence. PO Box and C/O addresses are not allowed | | |
| <input type="checkbox"/> Mailing Address: Country of Mailing Address: Mandatory to select one of the options below: <input type="checkbox"/> Home Address same as Mailing Address <input type="checkbox"/> Provide Home address if is different from Mailing Address Country of Home Address: | | |
| Mandatory to select only <u>ONE</u> option below for the address update. All Accounts, Products and Services will be updated if no selection is made. | | |
| <input type="checkbox"/> All Active Relationships with Accounts, Products and Services: <input type="checkbox"/> Inclusive of Citibank Currency Trading Account (CCTA – Refer to pg 2**) <input type="checkbox"/> Exclude credit card <input type="checkbox"/> All Credit Cards Only - Main Card Holder <input type="checkbox"/> Provide selected Relationship Title / Relationship or Account Number to be updated, inclusive of CCTA. <div>Relationship Title / Relationship Number / Account Number:</div> | | |
| Remove the following addresses / Contact / email (Tick and indicate the details) | | |
| <input type="checkbox"/> Business / Office / Additional / All other address <input type="checkbox"/> Home / Mobile / All other Contact Number <input type="checkbox"/> Email Address | | |
| New Contact Number Update. This update will supersede existing record. (Provide Country and Area Code): | | |
| <input type="checkbox"/> Home: | <input type="checkbox"/> Office: | <input type="checkbox"/> Primary Mobile: |
| | | <input type="checkbox"/> Additional Mobile: |
| New Email Address Update. This update will supersede existing record. | | |
| <input type="checkbox"/> Preferred Email Address: | | <input type="checkbox"/> Alternate Email Address: |
| Customer's Signature - Joint AND Account(s). ALL signatures are required: | | |
| Main Account Holder / date: | Joint Account Holder / date: | Joint Account Holder / date: |

CHANGE OF ADDRESS AND CONTACT DETAILS FORM



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|---|---|--|
| Bank Use Only: Face to face with Service Staff | | |
| Signature verification / ID sighted / Checklist completed by: | Independent Signature verification / ID / Checklist sighted by: | |
| | | |
| (Name / GEID / Signature of service staff) | (Name / GEID / Signature of service staff) | |
| FATCA – Residential Address / Mailing Address / Contact Number / Domicile change is to or from USA | | |
| <input type="checkbox"/> Obtain supporting document(s) (e.g., W8 & RWE / W9) for any change to USA. <input type="checkbox"/> Refer to RM for any changes to USA if customer have investments (UT, Bond, Note, PA, e-brokerage, etc). <input type="checkbox"/> Obtain W8 for any change from USA to other overseas or SG address. If customer is a US person, obtain W9 if customer has obtained one earlier. | | |
| In the case of a joint account, ALL accountholders are required to complete the relevant W8 & RWE / W9 form. | | |
| CRS – Residential Address / Mailing Address / Contact Number / Domicile change is to or from an overseas country | | |
| <input type="checkbox"/> Obtain CRS Self – Certification if change there is a change of address from one country to another AND <input type="checkbox"/> Obtain Reasonable Explanation if customer has foreign indicia but declares he is a non – Tax Resident of the country. <input type="checkbox"/> Obtain a new CRS Self- Certification and/or Reasonable Explanation if customer gives instructions to remove an overseas address and declares he is a non – Tax resident of the country. | | |
| In the case of a joint account, ALL accountholders are required to complete the relevant W8 & RWE / W9 form. | | |
| <input type="checkbox"/> **Citibank Currency Trading Account Send a copy of the address change form via email to RM and ARM, for their assistance to inform TSO to update address via Margin Man. | | |
| APPLICABLE TO OPERATIONS. | | |
| Does customer have any active relationship with no active account? | <input type="checkbox"/> Yes, close the relationship and do not tag the address to the relationship | <input type="checkbox"/> No, Proceed as per BAU |
| HIGH RISK COUNTRIES RCCPM 5.3.1.2.8 Is the update of address or contact number to any of the High-Risk countries? (Refer to the list of High-Risk countries). _____ (Callback officer signature / Name / SOE ID) _____ (Date / Time / Extension) | <input type="checkbox"/> Yes (Perform callback before update) | <input type="checkbox"/> No (Proceed with update) |
| SAMS Team Bank Use Only: Mail in instruction, inclusive of instruction received by RM | | |
| SAMS Team to perform the following: | | |
| 1) To confirm if there is change in contact number in the past 45 days. <input type="checkbox"/> No or <input type="checkbox"/> Yes. Callback attempts performed to previous number (3 times) | | |
| 2) Followed by: <input type="checkbox"/> Signature verification, AND <input type="checkbox"/> Callback to existing system registered number | | |
| INACTIVE DORMANT RCCPM 5.3.9.1.4 If this is a mail in instruction, does the customer have any accounts that is in inactive / dormant status? | <input type="checkbox"/> Yes (Perform callback before update) | <input type="checkbox"/> No (Proceed with update) |