

**ACCOUNT APPLICATION – INDIVIDUALS (PERSONAL)**

BOT: PSD Jurong Point Branch

☒ Savings Account ☐ S\$ Current Account ☐ S\$ Fixed Deposit

POSB SA P248-32794-4

Your Personal Particulars

Full Name as in NRIC/Passport MR LOH SHEE LEONG	NRIC/Passport No. M740114035791	Date of Birth 14/01/1974	Sex M
	Nationality NATIONAL OF MALAYSIA	Race CHINESE	Marital Status SINGLE
Account Mailing Address BLK 276A JURONG WEST STREET 25 #11-55 Postal Code: 641276	Country of Residence SINGAPORE	GST Belonging* YES	
	Occupation TECHNICIAN		
Permanent Local/Foreign Residential Address BLK 276A #11-55 JURONG WEST STREET 25 Postal Code: 641276	Employer FLEXTRONICS MFG (S) PTE LTD		
	Home Telephone	Other Contact Nos. Handphone: 81160287	

Beneficiary's Particulars (for Trust Account Only)

Full Name as in Birth Certificate / NRIC / Passport		BC/NRIC/Passport No.	Date of Birth	Sex
Nationality	Race	Marital Status	Country of Residence	GST Belonging*

Funds Transfer Instruction for MySavings Account (MSA) / POSBkids Trust Account

Monthly Savings Amount : \$	Where debiting account belongs to a 3 rd party 3rd Party Account Holder's Signature/Thumbprint
Debiting Account No. :	
Monthly Savings Date : (for MSA)	

Application For GIRO Transfer Facility for POSB Current Account

Linked to POSB Savings Account No.:

Agreement

1. Please open the selected account(s) in my name. I have read, understood and agree to abide by the Terms and Conditions Governing Accounts, a copy of which I acknowledge has been made available to me and is also accessible from the Bank's website.
2. Declaration on Beneficial Owner
☐ I hereby declare and confirm that I am the beneficial owner of the account and of all funds deposited or will be deposited into the account.
☐ I hereby declare that I am NOT the beneficial owner of the account and have completed the Declaration on Beneficial Ownership form.

e-Sign

Account holder's Signature / Thumbprint

11/05/2010

Date

For Bank Use Only

Attended by (Name/Signature/Date) LAU GEOK CHOO 11/05/2010	Checked By (Name/Signature/Date)
--	----------------------------------

* GST Belonging: Please indicate "Yes" if your residential or employment address is in Singapore. Please indicate "No" if both your residential and employment addresses are outside Singapore.

Notice on Deposit Insurance Scheme: Deposit accounts held by individuals and charities are insured by the Singapore Deposit Insurance Corporation for up to \$20,000 in aggregate across specified accounts for each depositor under the Deposit Insurance Act. Central Provident Fund Investment Scheme accounts are separately insured for up to \$20,000 in aggregate for each depositor. Foreign currency deposits, structured deposits and accounts earmarked or held as collateral are excluded from insurance coverage.

CUSTOMER'S COPY