

傳真: 2233 9988 (更改地址及刪除信貸資料恕不接受傳真/副本申請)

郵寄: 香港郵政總局信箱 27 號工銀亞洲信用卡中心

信用卡號碼: \_\_\_\_\_ 日期: \_\_\_\_\_  
 \_\_\_\_\_ 聯絡電話: \_\_\_\_\_

持卡人姓名 - 主卡: \_\_\_\_\_ 香港身份證號碼: \_\_\_\_\_  
 附屬卡: \_\_\_\_\_ 香港身份證號碼: \_\_\_\_\_

請遵照本人指示辦理以下各項申請

重發 <input type="checkbox"/> 自動櫃員機私人密碼 <input type="checkbox"/> 電話理財私人密碼 <input type="checkbox"/> 網上理財私人密碼
更改自動櫃員機螢光幕顯示之語言 <input type="checkbox"/> 中文 <input type="checkbox"/> 英文
補發卡 (所有補發之新卡將以郵寄方式寄出, 並需港幣 100 元補發卡手續費) 原因 - <input type="checkbox"/> 磁帶失效 <input type="checkbox"/> 更改簽名式樣 <input type="checkbox"/> 更改/更正卡面上姓名(請附上改名契及身份證副本) <input type="checkbox"/> 附加 自動櫃員機功能 (請注意: 增加此功能, 必須以補發卡處理) (以上服務均要求持卡人退還舊卡, 否則, 基於保安理由, 所有補發卡將安排新卡號, 而不作另行通知) (所有補發卡均安排新密碼, 請收到新密碼後方可使用櫃員機功能)
現金透支服務 - <input type="checkbox"/> 取消 <input type="checkbox"/> 增加 (包括主卡及附屬卡)
提取信用卡全數港幣結餘 <input type="checkbox"/> 轉往本人之另一信用卡賬戶: 信用卡賬號 _____ <input type="checkbox"/> 轉往本人於中國工商銀行(亞洲)之港元賬戶 _____
自動轉賬指示 (所有更改或取消必須於繳款到期日最少七個工作天前申請) <input type="checkbox"/> 取消現有自動轉賬, 賬戶號碼 _____ (如欲更改至另一銀行賬戶, 請填寫自動轉賬授權書) <input type="checkbox"/> 更改至最低還款 <input type="checkbox"/> 更改至全數款項
信用卡信用額 (更改手續費為港幣 100 元)(所有加額要求均需查閱個人信貸記錄, 一經遞交, 即表示同意) <input type="checkbox"/> 增加 (請同時附上最近期之薪金證明或財務資料以作審批) <input type="checkbox"/> 減低 信用額至港幣/人民幣 _____ 元 現時是否以合約形式受僱 (必須填寫) <input type="checkbox"/> 是 (合約到期日 _____ 年 _____ 月 _____ 日) <input type="checkbox"/> 不是 (學生卡不接受加額申請) 現時住宅類型: ( <input type="checkbox"/> 自住 <input type="checkbox"/> 按揭 - 每月供款金額: _____ <input type="checkbox"/> 租住 <input type="checkbox"/> 宿舍 <input type="checkbox"/> 與家人同住) (如選-按揭, 需客人提供 按揭每月供款金額)
八達通服務 - 八達通號碼 _____ / _____ / _____ / _____ (必須填寫八達通號碼) <input type="checkbox"/> 自動增值金額改為 - <input type="checkbox"/> 港幣 150 元 <input type="checkbox"/> 港幣 250 元 <input type="checkbox"/> 港幣 500 元* <input type="checkbox"/> 取消八達通自動增值服務** (請注意: 服務手續完成後, 當閣下收到*八達通更改自動增值金額通知書 **取消八達通通知書/手機短訊, 請客戶根據通知書/手機短訊辦理有關手續方能生效)
<b>只接受主卡持卡人申請, 並親身交還到任何一間分行 (請連同身份證副本一併遞交)</b> 刪除本人已結束及沒有欠款之信用卡賬戶信貸資料 (分行專用 - 已確認持卡人本人親身申請 職員編號 _____ 簽名 _____)
月結單服務 - 取消電子結單服務並改以郵寄方式收取月結單 (溫馨提示: 所有紙張月結單由 2017 年 10 月起將收取年費) (如欲申請電子結單服務, 請填寫電子理財服務/信用卡電子結單申請表格信用卡賬戶持有人專用)
取消超逾信用限額信貸服務
更改通訊記錄 - <input type="checkbox"/> 地址 (只接受主卡持卡人更改, 海外地址及郵政信箱恕不接受, 請以英文正楷填寫地址並親身交還任何一間分行, 傳真及副本恕不接受) <input type="checkbox"/> 住宅 <input type="checkbox"/> 通訊 <input type="checkbox"/> 辦事處 新地址: _____ <input type="checkbox"/> 電郵 電郵地址: _____ <input type="checkbox"/> 聯絡電話 - 住宅 _____ 辦事處 _____ 手提電話/傳呼機 _____ (分行專用-已確認持卡人本人親身申請並已核对其身份證明文件職員編號 _____ 簽名 _____)

主卡及/或附屬卡持有人簽署 (須與申請表上之簽署相同)

銀行專用 For Bank Use Only

Receiving Branch		Remarks	S.V. By	Input By	Checked By
Branch: _____	Staff: _____		Date	Date	Date

**Credit Card Account Services Request Form**

By Fax: 2233 9988 (address change & Delete the credit report data is not accepted by fax submission)

By Mail: ICBC (Asia) Credit Card Centre, P.O. Box. 27, General Post Office, HK

Credit Card No: |\_|\_|\_|\_| - |\_|\_|\_|\_| - |\_|\_|\_|\_| - |\_|\_|\_|\_| Date: \_\_\_\_\_  
 |\_|\_|\_|\_| - |\_|\_|\_|\_| - |\_|\_|\_|\_| - |\_|\_|\_|\_| Contact Tel : \_\_\_\_\_

Cardholder Name : (Principle) \_\_\_\_\_ HKID No : \_\_\_\_\_  
 (Supplementary) \_\_\_\_\_ HKID No : \_\_\_\_\_

Please comply with the request(s) specified below:

	Re-issue <input type="checkbox"/> ATM Pin <input type="checkbox"/> Phone Banking Pin <input type="checkbox"/> Internet Banking Pin
	Change Language on ATM screen <input type="checkbox"/> Chinese <input type="checkbox"/> English
	Card Replacement <b>(All replacement cards will be sent by mail and a handling fee HK\$100 will be charged)</b> Reason - <input type="checkbox"/> Magnetic Strip Damaged <input type="checkbox"/> Change of Signature <input type="checkbox"/> Change/Wrong embossed Name (please attach copy of Deed Poll & HKID card) <input type="checkbox"/> Add ATM facilities <b>(Attention: with this function, the bank will be handled as card replacement)</b> <b>(For security issue, if no existing card returns, all requests will be replaced with new card no. without further notice)</b> <b>(All replacement cards will follow by a new pin, please use the new pin to use any ATM facilities)</b>
	Cash Advance Service - <input type="checkbox"/> Cancel <input type="checkbox"/> Add (including Principal & Supplementary cards)
	HK Dollars Credit Balance Refund <input type="checkbox"/> By cashier order. <input type="checkbox"/> transfer the balance into my another ICBCA credit card or bank A/C, No. _____
	Direct Debit Authorization Service <b>(All requests must be applied at least 7 working days before the payment due date)</b> <input type="checkbox"/> cancel, DDA No. _____ <b>(If change to another DDA A/C, please fill in "Autopay Authorization Form")</b> <input type="checkbox"/> minimum payment <input type="checkbox"/> Full payment
	Credit Limit <b>(handling fee HK\$100 will be charged)</b> (the Bank may have considered a credit report from the credit reference agency on you for credit limit adjustment, once received your request means you agreed on this arrangement) <input type="checkbox"/> increase <b>(Please enclose copy of latest salary proof or other asset proof)</b> <input type="checkbox"/> decrease to HK Dollars / RMB _____ Are you under contract employment - <input type="checkbox"/> Yes (contract will be expired on _____) <input type="checkbox"/> No <b>(exclude for student)</b> Residential Type - <input type="checkbox"/> Self-owned <input type="checkbox"/> Mortgaged - Monthly Repayment Amount HK\$ _____ <input type="checkbox"/> Rented <input type="checkbox"/> Quarter <input type="checkbox"/> Living with Parents <b>(If Mortgaged, please provide monthly mortgage repayment amount)</b>
	Octopus Service – octopus card no. _____ / _____ / _____ / _____ <b>(must be provide)</b> <input type="checkbox"/> change the Automatic Add-value amount to - <input type="checkbox"/> HK\$150 <input type="checkbox"/> HK\$250 <input type="checkbox"/> HK\$500* <input type="checkbox"/> cancel the Automatic Add-value amount**. <b>(Attention: When received the *change of Automation Add-value Amount letter **Cancellation letter / SMS after completion, please according letter / SMS to activate the service.)</b>
	<b>Only applicable to principal cardholders</b> <b>(please submit the original form to any one of our branches together with HKID / Passport copy)</b> Delete the credit report data for my credit card which had been cancelled with no outstanding balance (for Branch use only: confirmed KYC was performed Staff No. _____ Signature: _____)
	Statement Service - cancel eStatement and accept monthly statement by mail <b>(Attention : Annual fee will be charged to any paper statement starting from Oct 2017)</b> <b>(For eStatement application, please fill in "Electronic Banking Services/Credit Card eStatement Application Form")</b>
	Cancel the credit card exceeds credit limit service
	Change contact Details - <input type="checkbox"/> Address <b>(only applicable to principal cardholders, oversea address and P.O. Box are not acceptable. )</b> <b>Please submit the original form to any one of our branches</b> <input type="checkbox"/> Residential <input type="checkbox"/> Correspondence <input type="checkbox"/> Office New Address: _____ <input type="checkbox"/> email email address: _____ (please use block letters) <input type="checkbox"/> contact tel. - Residential _____ Office _____ Mobile/Pager _____ (for Branch use only: confirmed KYC was performed & Identify verification was performed. Staff No. _____ Signature: _____)

\_\_\_\_\_  
 Principal and/or Supplementary Cardholder(s) Signature  
 (should be same as the application form)

銀行專用 For Bank Use Only

Receiving Branch		Remarks	S.V. By	Input By	Checked By
Branch: _____	Staff: _____		Date	Date	Date
Date	Date				