

Please attach the following documents:

- Photocopies of NRIC or Passport of all applicants
- Employment Pass for foreigners
- For employees: latest computerised payslip and latest Income Tax Notice of Assessment (NOA)
- For self-employed: latest Income Tax Notice of Assessment (NOA)
- For commissioned based: latest 6 months commission statements and latest Income Tax Notice of Assessment (NOA)
- Option to Purchase/Sale and Purchase Agreement
- Latest CPF Statement of Account
- Latest CPF Withdrawal Account Statement (For refinancing)
- Latest housing loan statement showing outstanding amount (For refinancing)
- Latest HDB housing loan statement from MyHDB page

Please complete all fields and tick where appropriate.

MAIN ACCOUNT HOLDER

US Person Declaration Yes¹ No²

A. Personal Details

New Client Existing Client

(Any new information provided in this application shall be taken as a request to update your existing particulars in the Bank's records)

Mr Mrs Mdm Miss Dr Others _____

Full name as in NRIC/Passport

Surname _____

First/Given Name _____

Gender Male Female

NRIC/Passport Number _____

Passport Expiry Date (Not applicable to Singapore Citizens)

Date of Birth

Nationality

Singapore Citizen

Singapore PR, Nationality _____ (Please specify)

Foreigner, Nationality _____ (Please specify)

Australia or New Zealand tax resident?

No Yes _____ (Please specify)

Marital Status Single Married Others

Mother's Maiden Name _____

Highest Education Received

Primary Secondary A Level/Pre-University

Diploma Degree Others

No. of Dependents _____

Permanent Residential Address

(Must not be a PO Box address and as per NRIC or other ID document)

Country _____ Postal Code _____

Mailing Address (Please state if different from above) Home Office

Country _____ Postal Code _____

Length of Stay at Address _____ Year(s) _____ Month(s)

Important information to note:

- If you wish to have a free credit report, you may obtain it within 30 calendar days from the date of approval or rejection of this application via the credit bureau website (www.creditbureau.com.sg). Alternatively, you may bring the approval or rejection letter and your NRIC to Credit Bureau (Singapore) Pte Ltd, 2 Shenton Way #20-02 SGX Centre 1 Singapore 068804 to obtain a free credit report.
- You can now print your Notices of Assessment at myTax Portal with your SingPass or IRAS PIN. The service is free. Log on to <https://mytax.iras.gov.sg> for more details. With photocopies of documents, the Bank will need to sight the original documents upon acceptance of our Facility Letter. The Bank also reserves the right to request additional supporting documents, where necessary, at any time during the loan application process.

ACCOUNT HOLDER 2

Relationship to Main Applicant _____

US Person Declaration Yes¹ No²

A. Personal Details

New Client Existing Client

(Any new information provided in this application shall be taken as a request to update your existing particulars in the Bank's records)

Mr Mrs Mdm Miss Dr Others _____

Full name as in NRIC/Passport

Surname _____

First/Given Name _____

Gender Male Female

NRIC/Passport Number _____

Passport Expiry Date (Not applicable to Singapore Citizens)

Date of Birth

Nationality

Singapore Citizen

Singapore PR, Nationality _____ (Please specify)

Foreigner, Nationality _____ (Please specify)

Australia or New Zealand tax resident?

No Yes _____ (Please specify)

Marital Status Single Married Others

Mother's Maiden Name _____

Highest Education Received

Primary Secondary A Level/Pre-University

Diploma Degree Others

No. of Dependents _____

Permanent Residential Address

(Must not be a PO Box address and as per NRIC or other ID document)

Country _____ Postal Code _____

Mailing Address (Please state if different from above) Home Office

Country _____ Postal Code _____

Length of Stay at Address _____ Year(s) _____ Month(s)

¹I am a U.S. citizen, resident, permanent resident, green card holder or U.S. tax payer by reason of having substantial physical presence in the U.S. or for any other reason.

²I acknowledge that I am aware that I need to notify the Bank within 30 days of any change to my status.

MAIN ACCOUNT HOLDER

Current Residence Ownership

- Fully owned Mortgaged
 Employer-provided Rented S\$ _____ per month
 Parents Others (Please specify) _____

Property Type

- Bungalow Semi-detached
 HDB Condominium
 Apartment Terrace

Contact Numbers (Please provide mobile number & 1 alternative number)

Home _____ Mobile _____
Office _____ Fax _____
Email _____

Applicable only for non-Singapore Citizens

Overseas Permanent Address

Country _____ Postal Code _____

Overseas Phone Numbers (country code) (area code) (phone number) _____

B. Employment

Name of Company _____

Company Address _____

Occupation _____

Job Title/Position/Designation _____

Job Status Employed Commission-based
 Self-employed _____ % Shareholding
 Others (Please specify) _____

Length of Employment _____ Year(s) _____ Month(s)

Basic Income S\$ _____

Commission/Bonus Income S\$ _____

Rental Income S\$ _____

Other Income (Please specify) S\$ _____

Total Monthly Income S\$ _____

Nature of Business/Industry

- Banking/Finance Government
 Building/Construction Travel/Hospitality
 IT/Communications Retail/F&B
 Manufacturing Others (Please specify) _____

Please complete the following if your current employment is less than one year.

Name of Previous Employer _____

Years in Service _____ Year(s) _____ Month(s)

Basic Income S\$ _____

Commission/Variable Income (Monthly) S\$ _____

Other Income Sources (Monthly) S\$ _____

Rental Dividends Others (Please specify) _____

ACCOUNT HOLDER 2

Current Residence Ownership

- Fully owned Mortgaged
 Employer-provided Rented S\$ _____ per month
 Parents Others (Please specify) _____

Property Type

- Bungalow Semi-detached
 HDB Condominium
 Apartment Terrace

Contact Numbers (Please provide mobile number & 1 alternative number)

Home _____ Mobile _____
Office _____ Fax _____
Email _____

Applicable only for non-Singapore Citizens

Overseas Permanent Address

Country _____ Postal Code _____

Overseas Phone Numbers (country code) (area code) (phone number) _____

B. Employment

Name of Company _____

Company Address _____

Occupation _____

Job Title/Position/Designation _____

Job Status Employed Commission-based
 Self-employed _____ % Shareholding
 Others (Please specify) _____

Length of Employment _____ Year(s) _____ Month(s)

Basic Income S\$ _____

Commission/Bonus Income S\$ _____

Rental Income S\$ _____

Other Income (Please specify) S\$ _____

Total Monthly Income S\$ _____

Nature of Business/Industry

- Banking/Finance Government
 Building/Construction Travel/Hospitality
 IT/Communications Retail/F&B
 Manufacturing Others (Please specify) _____

Please complete the following if your current employment is less than one year.

Name of Previous Employer _____

Years in Service _____ Year(s) _____ Month(s)

Basic Income S\$ _____

Commission/Variable Income (Monthly) S\$ _____

Other Income Sources (Monthly) S\$ _____

Rental Dividends Others (Please specify) _____

C. Details Of Property To Be Financed/Refinanced

Address of Subject Property

Block/House No. Street Name Unit No.
Development Name Postal Code
Name of Developer
Purchase Price S\$
Date of Purchase

Did you (1) receive any form of incentives including discounts, rebates, rental guarantees, gifts, interest payment arrangements, complimentary items such as vouchers, furniture or any form of movable household appliances; (2) obtain any loans from the developer, vendor or third party for the purchase of the property to be mortgaged; and/or (3) purchase the property to be mortgaged under a deferred payment scheme and are able to use the deferred amount for other purposes during the deferral period?

No Yes S\$ (Please specify amount received/value of item/deferred amount)

Property purchased in the name of

Property Type (Private)

Bungalow Semi-detached Townhouse Corner Terrace Intermediate Terrace Condominium
 Exec. Condominium Apartment Walk-up Apartment Others (Please specify)

No. of Storeys (For landed property only) Land Area (Sq ft) Built-in Area (Sq ft)

Property Type (HDB Flat)

4 Room 5 Room Executive Maisonette Built-in Area (Sq ft)

Property Type (Commercial)

Office Unit Shop Unit Others Land Area (Sq ft) Built-in Area (Sq ft)

Completion Status

Completed: Estimated age Year(s) Under Construction: TOP expected

State of Renovation

Original Renovated at cost of S\$ in year

Tenure of Property

Freehold Leasehold years w.e.f.

Property Use

Owner Occupied Investment: Estimated rental per month S\$

D. Your Financing Requirements

New Purchase

Buying from Direct from Developer Secondary Market

Purchase Price S\$

CPF Lump sum

No Yes S\$

CPF Stamp/Legal Fees

No Yes S\$

CPF for Monthly Repayment

No Yes S\$

Source of Downpayment

Savings From the sale of Others

Property loan required S\$ over Years

Bridging loan required S\$ over Months (Max. 6 months)

Address of existing property sold/to be sold

Type of property sold/to be sold HDB Private

Refinancing/Cashout

Existing Bank

Fully Paid (For cashout only) Yes No

Request		Additional Facilities	
Refinancing Amount			
Property Loan S\$ <input type="text"/> over <input type="text"/> Year(s)			
Amount Undrawn S\$ <input type="text"/> over <input type="text"/> Year(s)			
Equity Loan S\$ <input type="text"/> over <input type="text"/> Year(s)		Equity Loan S\$ <input type="text"/> over <input type="text"/> Year(s)	Loan Purpose <input type="text"/>
CPF utilised to date including accrued interest	S\$ <input type="text"/>		

CPF for Legal Fees

No Yes S\$

CPF for Monthly Repayment

No Yes S\$

E. Your Financial Details

Please list all outstanding credit facilities (include credit facilities that have been accepted and not disbursed) obtained from the HDB, a financial institution or a moneylender (singly or jointly or as guarantor).

Main Account Holder

Type of Facility (E.g. Credit Card, Personal Loan, Line of Credit, Housing Loan, Car Loan etc)	Financier	Single Borrower or Jointly with Other Borrowers or as Guarantor	Loan Outstanding	Credit Limit (If applicable)	Applicable Interest Rate	Tenure of Credit Remaining (In months)	Monthly Repayment Instalment	Collateral Details (For housing loan only)	Supporting Documents (Yes/No)
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		

Account Holder 2

Type of Facility (E.g. Credit Card, Personal Loan, Line of Credit, Housing Loan, Car Loan etc)	Financier	Single Borrower or Jointly with Other Borrowers or as Guarantor	Loan Outstanding	Credit Limit (If applicable)	Applicable Interest Rate	Tenure of Credit Remaining (In months)	Monthly Repayment Instalment	Collateral Details (For housing loan only)	Supporting Documents (Yes/No)
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		
			S\$	S\$			S\$		

Property Loan Applicant Confirmation And Declaration

By signing and submitting this Property Loan application:

1. I/We agree to execute such forms, agreements and facility letters as may be required in connection with the application, and agree to bear such fees and charges as may be required by the Bank from time to time in connection with the application;
2. I/We hereby declare that all statements, documents and information provided in this application are true and complete. If any information given herein becomes inaccurate or changes in any way, whether before this application is approved or whilst the facility is outstanding, or while my/our account(s) with the Bank are still open, I/we will promptly notify the Bank of such changes;
3. I/We hereby confirm that I/we have declared all the outstanding credit facilities (include credit facilities that have been accepted and not disbursed) that I/we have obtained from the HDB, a financial institution or a moneylender (singly or jointly or as guarantor);
4. I/We authorise the Bank to obtain and verify any information provided in this application or my/our credit standing from anyone the Bank may consider appropriate in Singapore or elsewhere (including but not limited to checks with any credit bureau recognized as such by the Monetary Authority of Singapore);
5. I/We acknowledge that the Bank may decline my/our application without giving me/us any reason(s) or explanation whatsoever. The statements and documents shall remain the Bank's property whether or not this application is approved;
6. I/We confirm that I/we am/are not an undischarged bankrupt(s) and that there are no legal proceedings commenced against me/us or any statutory demand served on me/us (whether individual or corporate) at the time of this application;
7. I/We authorise the Bank to disclose any information relating to me/us as may be permitted under the Banking Act Cap 19 or any other disclosure imposed by law. Where a Housing and Development Board ("HDB") flat is to be used as security for the mortgage loan, I/we irrevocably authorise the Bank to disclose any information relating to me/us as the HDB shall require. This authorisation will continue notwithstanding the application is not approved or account(s) not opened;
8. I/We hereby confirm that I/we have declared all amounts in relation to (1) the receipt of any form of incentives including discounts, rebates, rental guarantees, gifts, interest payment arrangements, complimentary items such as vouchers, furniture or any form of movable household appliances; (2) any loans from the developer, vendor or third party for the purchase of the property to be mortgaged; and/or (3) any deferred payment scheme under which I/we are purchasing the property to be mortgaged.

F. Servicing Account Application

- Yes, I/we³ have an existing deposit account with the Bank and would like to use it to service the property loan.

Account Name

Account Number

- Yes, I/we³ would like to use a 3rd party account for the purpose of servicing the property loan. (Please enclose 3rd party Authorisation Form)

Account Name

Account Number

- Yes, I/we³ would like to open a deposit account with the Bank for the purpose of servicing the property loan. (Please fill up the remaining section)

- Yes, I/we³ would like to open an ANZ Signature Priority Banking account with the Bank for the purpose of servicing the property loan. (Please fill up the remaining section)

³Delete where applicable

G. Accounts To Open

Current Accounts

- ANZ Signature Priority Banking Current Account
 ANZ Home Loan Current Account

ATM/Phone Banking Access Indicator⁴

- Primary Account
 Primary Account

Source of Wealth (To be filled up by Main Applicant)

- Business Income
 Inheritance/Gift
 Savings derived from
 Investment Returns
 Salary
 Others (Please specify)

Source of Wealth (To be filled up by Joint Applicant)

- Business Income
 Inheritance/Gift
 Savings derived from
 Investment Returns
 Salary
 Others (Please specify)

Planned transaction amount (Per month)

- S\$10,000 & below
 S\$50,001 to 100,000
 Above S\$200,000
 S\$10,001 to 50,000
 S\$100,001 to 200,000

Planned transaction amount (Per month)

- S\$10,000 & below
 S\$50,001 to 100,000
 Above S\$200,000
 S\$10,001 to 50,000
 S\$100,001 to 200,000

⁴ Please specify ATM/Phone Banking access indicator for the account(s) opened under Section G.

Note: Please select only 1 account as Primary Account and the rest of the accounts will be linked as secondary.

Deposit Insurance Scheme: Singapore dollar deposits of non-bank depositors are insured by the Singapore Deposit Insurance Corporation, for up to S\$50,000 in aggregate per depositor per Scheme member by law. Foreign currency deposits, dual currency investments, structured deposits and other investment products are not insured.

H. Banking Services

Debit Card⁵ (The Current Account selected comes equipped with an ANZ Visa Debit Card)

Name as it should appear on the ANZ Debit Card⁶ (Up to a maximum of 19 characters)

Main Account Holder

Account Holder 2

Point of sale⁷ daily limit (Please select one⁸)

S\$0 S\$1,000 S\$2,000 S\$5,000

S\$0 S\$1,000 S\$2,000 S\$5,000

I/We do not wish to have the Debit Card

I would need a Cheque Book

I would need a Phone Banking⁵

Consent to Marketing Information and Personal Data Usage

I would like to receive marketing information and materials on products, services or events, provided by Australia and New Zealand Banking Group Limited, Singapore Branch ("ANZ") and its authorised merchants and agents, via (you may ✓ one or both options):

Main Account Holder Phone call SMS/MMS, fax, email and postal mail

Account Holder 2 Phone call SMS/MMS, fax, email and postal mail

By ✓ this form, I consent to the chosen mode(s) of communication and agree to the Terms and Conditions stated below.

Terms and Conditions for Consent to Marketing Information and Personal Data Usage

1. My consent given here will override my registration on the Do Not Call Registry, if applicable.
2. I consent to ANZ, its agents and service providers (in Singapore or otherwise) collecting, using, disclosing and processing my personal data, to provide me with marketing information and materials on products, services or events, provided by ANZ and its authorised merchants and agents.
3. My consent applies to Singapore telephone numbers under my name in ANZ's records including new telephone numbers that I may provide or update ANZ with from time to time.
4. My consent given here shall be valid regardless of the success of my application.

I/We have read and understood the declaration and authorisation section set out in this form. I/We affirm the said declaration and agree and represent to the Bank to abide and be bound by the matters stated therein. By signing on this form, I consent to ANZ contacting me via phone/SMS relating to my application notwithstanding any registration on the Do Not Call Registry.

⁵ Please specify ATM/Phone Banking access indicator for the account(s) opened under Section G.

Note: Please select only 1 account as Primary Account and the rest of the accounts will be linked as secondary.

⁶ If the embossed name for the card is not indicated in this form, the Bank shall use the account holder's full name, subject to character limitation on card.

⁷ Point of sale refers to purchase of goods and services at retail merchants using the ANZ Visa Debit Card.

⁸ In the absence of any point of sale daily limit specified, a default limit of S\$2,000 will be applicable.

Account Mandate

To: Australia and New Zealand Banking Group Limited, Singapore

1. I/We hereby request and authorise Australia and New Zealand Banking Group Limited, Singapore Branch (the "Bank"), to open an ANZ Bank Account which includes one or more account(s) of any kind as I/we may request the Bank in accordance with this Mandate and subsequently to open such further account(s) of any type in my/our joint names of whatever nature as I/we request (the "Account(s)") in accordance with and subject to the Bank's Terms and Conditions for ANZ Bank Account (the "Terms"), as amended from time to time by the Bank.
2. The Bank is hereby authorised and instructed generally, to act on instructions given by me/us in accordance with the Terms. **The Bank may, in its discretion and on such terms as the Bank may impose, allow instructions to be given by phone, fax and other form of communication and I/we shall bear the risks arising therefrom, and indemnify the Bank, as set out in the Terms.**
3. In the absence of contrary written instructions which the Bank may agree to, the conditions set out in the Terms (including, but not limited to, those set out in the Mandate) shall apply to each and every Account, of whatever nature, now or hereafter opened by the Bank or by me/us in our joint names.
4. I/We have been supplied with a copy of the Terms, the Statement of Disclosure for Joint Accounts, Risk Disclosure Statement for Investments and Schedule of Charges and agree to abide thereby.
5. Where I/we have requested for Phone Banking Services and ATM Services, I/we confirm that I/we have read the Bank's Terms and Conditions for 24-hour Banking and agree to abide thereby.
6. I/We agree not to access Digital Banking unless I/we have read the Bank's Terms and Conditions for Personal Internet Banking - Digital Banking and further agree to abide thereby.
7. In the event of any discrepancy between this Mandate and the terms and conditions indicated in points 4, 5 and 6, the express terms of this Mandate shall prevail.
8. I/We confirm that I/we have been given the opportunity to consult with my/our professional advisors before agreeing to the terms and conditions indicated in points 4, 5 and 6 and this Mandate.
9. I/We agree that the Bank, its agents and service providers (in Singapore or otherwise) may collect, use, disclose and/or process my/our personal data and any information relating to me/us (including but not limited to my/our Accounts, financial condition and/or transactions) in accordance with the Terms and for the purposes stipulated therein. Where personal data is to be transferred out of Singapore, I/we acknowledge and agree that the Bank will comply with the Personal Data Protection Act in doing so and take appropriate steps to ensure that the recipient of the personal data is bound by legally enforceable obligations to provide to the transferred personal data a standard of protection that is at least comparable to the protection under the Act, such that the personal data is kept secure and confidential.
10. If I/we were referred to the Bank by any person, I/we acknowledge that the referrer may receive rewards from the Bank in respect of such referral and that the referrer may be able to infer my/our approximate account balance

based on the amount of rewards awarded to the referrer, and I/we hereby consent to the Bank informing the referrer of my/our account opening and of the amount of rewards awarded to the referrer.

11. I/We hereby warrant that all the information and documents provided by me/us in relation to this application are true, complete and accurate in all respects.
12. If I/we qualify for participation in the ANZ Signature Priority Banking New Client Welcome Rewards Promotion and/or ANZ Signature Priority Banking Referral Rewards Programme, I/we agree to accept and be bound by the Terms & Conditions for ANZ Signature Priority Banking New Client Welcome Rewards Promotion and/or Terms & Conditions for ANZ Signature Priority Banking Referral Rewards Programme, both as amended and in effect from time to time ("Rewards Terms & Conditions"). A copy of the Rewards Terms & Conditions is available on the Bank's website (www.anz.com.sg) and a printed copy of the same is available upon request at any of the Bank's branches.
13. I/We acknowledge that it is my/our responsibility to comply with the tax obligations in the countries where I/we may have or otherwise incur such obligations (whether due to my/our nationality, tax domicile, incorporation, source of income, physical presence or otherwise) ("**Jurisdictions**").
14. I/We declare that I/we have not committed or been convicted of any tax evasion or money laundering related offences in any court of law or administrative proceedings in the Jurisdictions stated above and my/our source of funding is not the proceeds of any serious tax crime.
15. In the event that my/our particulars provided in this application differ from my/our existing particulars in the Bank's records, I/we request that such existing particulars be updated and superseded accordingly.

Deposit Insurance Scheme: Singapore dollar deposits of non-bank depositors are insured by the Singapore Deposit Insurance Corporation, for up to S\$50,000 in aggregate per depositor per Scheme member by law. Foreign currency deposits, dual currency investments, structured deposits and other investment products are not insured.

Custody Agreement: The Bank has arrangements with various custodians to hold the assets (excluding cash) which you have delivered or transferred through the Bank for custody. A summary of the key terms of the agreements entered into with each custodian, and/or the manner in which the custody accounts are maintained and established has been made available for your easy reference. This summary can be found on the Bank's website at www.anz.com.sg (<http://www.anz.com/singapore/en/signature-priority-banking/products-services/terms-conditions-products>). A copy of the Summary of Custody Agreements will be made available upon request at any of the Bank's branches.

Notification on Outsourcing of our Banking Services: Australia and New Zealand Banking Group Limited, Singapore branch ("ANZ") may from time to time engage the services of our head office, its branches, subsidiaries or affiliates and third parties (collectively "service providers") for certain outsourced activities. Whether our service providers are located in Singapore or elsewhere, they are strictly required to maintain information security and customer confidentiality to the same standard as ANZ is responsible for.

The laws in Singapore and other countries may require ANZ and our service providers to disclose information relating to ANZ's customers to relevant authorities from time to time. The circumstances under which such disclosure may be required are limited and include compulsion under law, court order, police investigations or criminal prosecutions.

ANZ Signature Priority Banking

I/We understand that to qualify as a Signature Priority Banking client of ANZ Singapore (the "Bank"), a minimum requirement of S\$150,000 (or currency equivalent) in deposits, investments and/or insurance is required. I/We hereby agree that in the event my/our total balances with the Bank fall below S\$150,000 (or currency equivalent), a monthly service charge and other applicable charges as per the Bank's Schedule of charges may be levied on me/us.

Signing Conditions For Joint Accounts

(Any change to the signing condition subsequently must be notified in writing to the Bank by all Account Holders)

- Any one of us
 All of us
 Others (Please specify)

Client Acknowledgement

Name of Main Account Holder

Signature of Main Account Holder

Date

Please tick if you are a staff of ANZ

Name of Account Holder 2

Signature of Account Holder 2

Date

Please tick if you are a staff of ANZ

I. Credit Card Application

Principal Card Applicant

I would like to apply for the following ANZ Credit Card.

ANZ Optimum World MasterCard Credit Card

Select your preferred category:

Dining & Leisure Travel Shopping Groceries

Selected category will be valid for the immediate calendar quarter (based on the date of application approval) and the next calendar quarter. To continue enjoying 5% cash rebate⁹ in your preferred category, please submit your selected category by 25th of the month before the start of a new calendar quarter.

ANZ Travel Visa Signature Credit Card

ANZ Platinum Visa Credit Card ANZ Platinum MasterCard Credit Card

ANZ Switch Platinum Credit Card

Effective interest rates are 25% p.a. for ANZ Optimum World MasterCard Credit Card, ANZ Travel Visa Signature Credit Card and ANZ Platinum Credit Card, and 23% p.a. for ANZ Switch Platinum Credit Card, and interest is subject to compounding if the monthly interest charges are not repaid in full.

Do you have an existing ANZ Credit Card? Yes No

(Please select only one)

I am the Main Applicant of the ANZ Property Loan

I am the Joint Applicant of the ANZ Property Loan

Name to appear on credit card (Please include surname)

(Maximum 18 characters)

NRIC/Passport Number

Supplementary Card Applicant

(Please select only one)

Joint Applicant of the ANZ Property Loan is the Supplementary Card Applicant

Main Applicant of the ANZ Property Loan is the Supplementary Card Applicant

Name to appear on credit card (Please include surname)

(Maximum 18 characters)

NRIC/Passport Number

Billing Address (Must not be PO Box address)

Residential Office Mailing

For purposes of this application, we will be retrieving your particulars from the Bank's current record.

- Home Phone Number
- Residential Address
- Marital Status
- Mobile Phone Number
- Office Address
- Number of Dependents
- Office Phone Number
- Mailing Address
- Education Level
- Email Address
- Nationality
- Employment Industry

Your credit card(s) and all future communications related to your credit card(s) will be sent to your billing address/mobile number/email address as per the Bank's record.

Please keep us informed if any of these particulars is changed by submitting the Information Update Form which can be found at anz.com.sg

My Preferred Credit Limit

You may choose to request for your overall preferred credit limit¹⁰ up to four times of your monthly income, or higher multiplier if your annual income is S\$120,000 and above. Existing ANZ Credit Card and/or ANZ MoneyLine account holders who are applying for an additional card will enjoy their existing credit limit if they do not submit latest income documents.

My preferred credit limit¹¹ (Minimum S\$500, rounded to the nearest hundred)

For Credit Card S\$

Please tick here if you would like the Bank to assign a credit limit¹²

⁹ Cash rebate will be awarded in the form of Optimum\$ and can be redeemed under the ANZ Optimum Rebate Programme.

¹⁰ Overall credit limit defines as the combined credit limit that is assigned to your ANZ credit card and ANZ MoneyLine account(s).

¹¹ Please note that the credit limit assigned to you is subject to the Bank's approval and discretion. The final approved credit limit may be lower than what you have indicated.

¹² Please note that the Bank will assign a credit limit based on its discretion and in accordance with regulatory guidelines when you select the option to allow the Bank to assign such credit limit for you.

MY DECLARATION AND AUTHORISATION

By signing this form, I/we hereby agree and represent to the Bank that:-

1. I/we ask that an ANZ Credit Card account and/or a Supplementary Credit Card(s) mentioned herein to be opened and issued to me/us and with the same credit limit as assigned for both Principal Cardmember and Supplementary Credit Card holder until I/we/the Bank terminate(s) the Card(s).
2. I/We hereby declare that the information given in this application and all the documents submitted to the Bank are complete, true and accurate and belong to the Bank absolutely and that I/we have not wilfully withheld any material fact. I/We undertake to notify the Bank immediately of any change in such information.
3. I/We hereby authorise and give the Bank consent to conduct credit checks on me/us (including but not limited to checks with any credit bureau recognised as such by the Monetary Authority of Singapore) and to obtain and verify and/or to disclose or release any information relating to me/us and/or any of my/our account(s) from or to any other party or source as the Bank may from time to time deem fit at the Bank's discretion for the purpose of this application and without any liability or notice to me/us.
4. I/We confirm that at the time of the application, I am not/neither of us is an undischarged bankrupt and no statutory demand or legal proceeding has been served on or commenced against me/us.
5. I/We agree to be bound by the terms of the Mandate, the Cardmember's Agreement, the Terms and Conditions Governing ANZ MoneyLine Accounts, the Terms and Conditions for 24-hour Banking, Terms and Conditions for ANZ Debit Card, Terms and Conditions for Personal Internet Banking - Digital Banking, and such other terms and conditions, including the applicable Product Highlight Sheet and Information Guide, as the Bank may prescribe from time to time, copies of which are available for my/our perusal at the Bank's website, upon request at any of the Bank's branches and/or which will be extended to me/us upon the Bank's approval of my/our application herein together with my Debit card and/or Customer Identification Number.
6. I/We agree that the Bank, its agents and service providers (in Singapore or otherwise) may collect, use, disclose and/or process my/our personal data and any information relating to me/us (including but not limited to my/our Card Account and/or Card Transactions) in accordance with the Cardmember's Agreement, and for the purposes stipulated therein. Where personal data is to be transferred out of Singapore, I/we acknowledge and agree that the Bank will comply with the Personal Data Protection Act in doing so and take appropriate steps to ensure that the recipient of the personal data is bound by legally enforceable obligations to provide to the transferred personal data a standard of protection that is at least comparable to the protection under the Act, such that the personal data is kept secure and confidential.
7. If, for any reason whatsoever, the Card Account is closed (whether by me/us, the Bank or otherwise) within the period of nine (9) months from the date of opening of the Card Account, I/we agree that the Bank shall be entitled to claim from me/us full reimbursement of the cost of any welcome gift which the Bank may have given to me/us upon approval of my/our application and/or activation of my/our Card Account. I/We hereby authorise the Bank to debit the Card Account for the cost of such gift (as determined by the Bank) prior to closure of the Card Account.
8. The preferred credit limit indicated is subject to the approval of the Bank at its reasonable discretion. The Bank will assign a credit limit based on the Bank's discretion and in accordance with regulatory guidelines when you select the option to allow the Bank to assign a credit limit for you. The overall credit limit of your ANZ Card(s) and ANZ MoneyLine account(s) is up to a) four times of your monthly income, b) or higher multiplier of your monthly income as may be permitted according to regulatory guidelines and is applicable to all your Credit Card account(s) and/or MoneyLine account and/or supplementary account(s). The Bank reserves the right to request for any additional documents at any time.
9. I/We agree that the approval of this application is subject to the Bank's discretion and that the Bank reserves the right to decline the application without giving any reason.

Disclaimer: No product or service referred to herein may be offered or sold within the United States or to or for the benefit of US Persons. Neither this document, nor any copy thereof may be sent to or taken into the United States or distributed in the United States or to a US person. The full disclaimers at our website at anz.com.sg are deemed to be incorporated herein.

Name of Principal Card Applicant

Signature of Principal Card Applicant

Date

Name of Supplementary Card Applicant

Signature of Supplementary Card Applicant

Date

BANK USE ONLY

Credit Card Source Code

2 1 1 1 5 7 1 0 P B A U H L

Follow up required for Income Documents Yes No

Input	Check	WC Y/N	EV Y/N/W	
SA		WC Y/N		
EX	CC	CO1	AL	CO2

BANK USE ONLY

Bank Staff Confirmation

Client signature is witnessed by/confirmed by:

Name of Bank Staff

Signature of Bank Staff

Date

RM/BDM/RO Code

RM/BDM/RO Name

Source of Mortgage Referral

Agent/Intermediary

Name of Agency/Intermediary

Branch

Name of Branch

Client Referral (MGM)

Full Name of Referrer

Call Centre

Full Name of Employee

Online

Direct Mailers/Newspaper

Self Solicitation

Others

Full Name of Referrer

Full Name of Employee

CIF Number

Source of Account

0 – Self Solicitation

2 – Phone Banker Referral

5 – Credit Card Referral

N – Mortgage Referral

1 – Client Referral (MGM)

3 – Overseas Branches Referral

6 – Commercial Banking Referral

S – Staff Referral

Others (Please specify)

CIF Number for Client Referral

Account Opening Check

Documents Submitted

Account Application Form (Fully completed and signed by customer)

Identity Card/Passport (Original sighted and copy made for file)

Proof of Address (Original sighted and copy made for file)

OMLR (Duly signed by approvers)

Income Document

WC Result

SG Check Result

Name of Checker

Signature of Checker

Date

Account Creation (Account Services Operations)

Main Account Holder

Are the documents completed? No Yes
Is there any hit in checks? No Yes

If yes, please indicate

CIF Number of Main Account Holder

Debit Card Issued No Yes

Account Holder 2

Are the documents completed? No Yes
Is there any hit in checks? No Yes

If yes, please indicate

CIF Number of Account Holder 2

Debit Card Issued No Yes

Accounts to Open

Current Accounts

- ANZ Signature Priority Banking Current Account
- ANZ Home Loan Current Account

Input By

Name

Signature

Date

Signature Scanning

Scanned By
Name

Signature

Date

ATM/Phone Banking Access Indicator

(Note: Please select only 1 account as Primary Account and the rest of the accounts will be linked as secondary)

Account Number Primary Account

Account Number Primary Account

Checked By

Name

Signature

Date

Checked By

Name

Signature

Date

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

► For use by individuals. Entities must use Form W-8BEN-E.

► Information about Form W-8BEN and its separate instructions is at www.irs.gov/formw8ben.

► Give this form to the withholding agent or payer. Do not send to the IRS.

Do NOT use this form if:

- You are NOT an individual **W-8BEN-E**
- You are a U.S. citizen or other U.S. person, including a resident alien individual **W-9**
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services) **W-8ECI**
- You are a beneficial owner who is receiving compensation for personal services performed in the United States **8233 or W-4**
- A person acting as an intermediary **W-8IMY**

Instead, use Form:

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner		2 Country of citizenship	
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.			
City or town, state or province. Include postal code where appropriate.			Country
4 Mailing address (if different from above)			
City or town, state or province. Include postal code where appropriate.			Country
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)		6 Foreign tax identifying number (see instructions)	
7 Reference number(s) (see instructions)		8 Date of birth (MM-DD-YYYY) (see instructions)	

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the reasons the beneficial owner meets the terms of the treaty article: _____

Part III Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner or account holder of a foreign financial institution,
- The person named on line 1 of this form is not a U.S. person,
- The income to which this form relates is:
 - (a) not effectively connected with the conduct of a trade or business in the United States,
 - (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - (c) the partner's share of a partnership's effectively connected income,
- The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country, and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here



Signature of beneficial owner (or individual authorized to sign for beneficial owner)

Date (MM-DD-YYYY)

Print name of signer

Capacity in which acting (if form is not signed by beneficial owner)

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

► For use by individuals. Entities must use Form W-8BEN-E.
 ► Information about Form W-8BEN and its separate instructions is at www.irs.gov/formw8ben.
 ► Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do NOT use this form if:

- You are NOT an individual W-8BEN-E
- You are a U.S. citizen or other U.S. person, including a resident alien individual W-9
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services) W-8ECI
- You are a beneficial owner who is receiving compensation for personal services performed in the United States 8233 or W-4
- A person acting as an intermediary W-8IMY

Instead, use Form:

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner	2 Country of citizenship
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.	
City or town, state or province. Include postal code where appropriate.	Country
4 Mailing address (if different from above)	
City or town, state or province. Include postal code where appropriate.	Country
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)	6 Foreign tax identifying number (see instructions)
7 Reference number(s) (see instructions)	8 Date of birth (MM-DD-YYYY) (see instructions)

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the reasons the beneficial owner meets the terms of the treaty article: _____

Part III Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner or account holder of a foreign financial institution,
- The person named on line 1 of this form is not a U.S. person,
- The income to which this form relates is:
 - (a) not effectively connected with the conduct of a trade or business in the United States,
 - (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - (c) the partner's share of a partnership's effectively connected income,
- The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country, and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here ►

 Signature of beneficial owner (or individual authorized to sign for beneficial owner) Date (MM-DD-YYYY)

 Print name of signer Capacity in which acting (if form is not signed by beneficial owner)

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 25047Z

Form **W-8BEN** (Rev. 2-2014)