



**CHANGE OF ADDRESS AND CONTACT DETAILS FORM**

Name(s) as per NRIC / Passport:	NRIC(s) / Passport Number(s):	Customer Number(s):
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**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

Mailing Address:

Country of Mailing Address:

**Mandatory to select one of the options below:**

Home Address same as Mailing Address  Provide Home address if is different from Mailing Address

Country of Home Address:

**Mandatory to select only ONE option below for the address update.**

**All Accounts, Products and Services will be updated if no selection is made.**

**All Active Relationships with Accounts, Products and Services:**

Inclusive of Citibank Currency Trading Account (CCTA – Refer to pg 2\*\*)

Exclude credit card

**All Credit Cards Only - Main Card Holder**

**Provide selected Relationship Title / Relationship or Account Number to be updated, inclusive of CCTA.**

Relationship Title / Relationship Number / Account Number:

**Remove the following addresses / Contact / email (Tick and indicate the details)**

Business / Office / Additional / All other address  Home / Mobile / All other Contact Number

Email Address

**New Contact Number Update. This update will supersede existing record. (Provide Country and Area Code):**

Home:

Office:

Primary Mobile:

Additional Mobile:

**New Email Address Update. This update will supersede existing record.**

Preferred Email Address:

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**

<b>Bank Use Only: Face to face with Service Staff</b>		
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)	
<b>FATCA – Residential Address / Mailing Address / Contact Number / Domicile change is to or from USA</b>		
<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.		
<b>CRS – Residential Address / Mailing Address / Contact Number / Domicile change is to or from an overseas country</b>		
<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.		
<b>APPLICABLE TO OPERATIONS.</b>		
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
<b>HIGH RISK COUNTRIES RCCPM 5.3.1.2.8</b> 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)
<b>SAMS Team Bank Use Only: Mail in instruction, inclusive of instruction received by RM</b>		
SAMs Team to perform the following:		
<b>1) To confirm if there is change in contact number in the past 45 days.</b>		
<input type="checkbox"/> No or <input type="checkbox"/> Yes. Callback attempts performed to previous number (3 times)		
<b>2) Followed by:</b>		
<input type="checkbox"/> Signature verification, AND <input type="checkbox"/> Callback to existing system registered number		
<b>INACTIVE DORMANT RCCPM 5.3.9.1.4</b> 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)