

Permanent Credit Limit Increase Request Form

To: Fubon Bank Credit Card Centre

Postal address: 23/F, Fortress Tower, 250 King's Road, North Point, Hong Kong

Fax number : 2508 9613

- Please complete this form in **BLOCK LETTERS** and place 「√」 in the appropriate box.
- If there is more than one supplementary cardholder, please make a photocopy of this form to fill in.
- Please return the completed and signed form with a copy of your latest income or asset proof* by fax/mail to the above fax number/address (if you have already sent the form by fax, please do not re-confirm by mail.)
- If there are any changes of your personal information so provided, the Bank may contact you to follow up and/or verifications.
- Should you have any enquiries, please call our Fubon Bank Integrated Customer Service Hotline at 2566 8181.

*Latest income proof includes: Latest Tax Demand Note (First and Second page); OR Latest 1 month's payroll slip (Applicant with commission income has to submit the latest 3 months' payroll slip); OR Latest Bank Statement / Passbook showing salary record (with your name and account numbers shown; Applicant with commission income has to submit the latest 3 months' bank statement / passbook)
 Latest asset proof includes: latest 1 month's bank deposit proof (applicable to non-working group only)

IMPORTANT NOTES

Please read the following notes carefully before completing this form.

Access to credit report: To increase the credit limit of your credit card, we may access and obtain your credit report held by the following credit reference agency to conduct such review. If you wish to access your credit report maintained with the credit reference agency or to update related information, you can directly contact the credit reference agency - TransUnion Limited (Address: Suite 1006, Tower 6, The Gateway, 9 Canton Road, Tsimshatsui, Kowloon, Hong Kong. Telephone: 2577 1816)

Purposes of Collection: The information provided in this form ("Data") will be used to increase the credit limit of your credit card and update the customer information in the Bank (which help us with record keeping, reporting and other legal requirements) and/or other purposes set out in the "Notice to Customers and Other Individuals relating to the Personal Data (Privacy) Ordinance and Consumer Credit Data" ("PDPO Notice") sent to customers by the Bank from time to time. You may also visit our official website - www.fubonbank.com.hk for the details of the PDPO Notice.

Data collected is accessible to officers or persons processing the retrieval, updating and handling of the personal data.

Access to Personal Data and Enquiry: You have a right to access to, and to request the correction of, the personal data and other related information you supplied in accordance with the provisions of the Personal Data (Privacy) Ordinance (Cap.486). Such requests and enquiries should be made in writing to: The Data Protection Officer of Fubon Bank (Hong Kong) Limited, 38 Des Voeux Road Central, Hong Kong (Fax: 2537 1512)

Section 1

All of the information required in this section is mandatory.

Principal Cardholder	Supplementary Cardholder (if applicable)
1) Name in English : _____ Name in Chinese : _____	1) Name in English : _____ Name in Chinese : _____
2) Credit Card Number : _____	2) N/A
3) Purpose of Permanent Credit Limit Increase : _____	3) N/A
4) Please increase my credit limit to HK\$: _____	4) N/A
5) HK ID. No. / Travel Document No. / Taiwan ID No. <input type="checkbox"/> HKID _____ <input type="checkbox"/> Passport/Others _____ <input type="checkbox"/> TWID _____	5) HK ID Doc. No. / Travel Document No. / Taiwan ID No.: <input type="checkbox"/> HKID _____ <input type="checkbox"/> Passport/Others _____ <input type="checkbox"/> TWID _____

Section 2

All of the information in this section is optional unless an update is required, otherwise mandatory.

6) Contact Number : Mobile _____ Office _____	6) N/A
7) Nationality : <input type="checkbox"/> Chinese <input type="checkbox"/> Others _____	7) Nationality : <input type="checkbox"/> Chinese <input type="checkbox"/> Others _____
8) Residential Address: _____ _____ _____	8) Residential Address: _____ _____ _____
9) Permanent Address (Mandatory if the permanent address is different from residential address) : _____ _____ _____	9) Permanent Address (Mandatory if the permanent address is different from residential address) : _____ _____ _____
10) Country of Residency : <input type="checkbox"/> PRC - Hong Kong <input type="checkbox"/> Others _____	10) Country of Residency : <input type="checkbox"/> PRC - Hong Kong <input type="checkbox"/> Others _____
11a) Employer Name:	11a) Employer Name:
11b) Nature of Employer Business:	11b) Nature of Employer Business:
11c) Position Nature: <input type="checkbox"/> Owner / Partner / Director <input type="checkbox"/> Senior Executive / Authorised Signatory <input type="checkbox"/> Shareholder holds \geq 10% of issued capital <input type="checkbox"/> General Staff or Others (Please specify) _____	11c) Position Nature: <input type="checkbox"/> Owner / Partner / Director <input type="checkbox"/> Senior Executive / Authorised Signatory <input type="checkbox"/> Shareholder holds \geq 10% of issued capital <input type="checkbox"/> General Staff or Others (Please specify) _____
12) Your sources of wealth is/are derived from _____	12) Your sources of wealth is/are derived from _____
13) Have you been refused by another bank to establish a banking relationship before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state : _____	13) Have you been refused by another bank to establish a banking relationship before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state: _____

DECLARATION:

I/We confirm that the information provided is true, complete and accurate. I/We will provide updated information to the Bank in writing in the event that any of the information provided changes. I/We declare that I am/we are the beneficial owner of my/our facility account and any transactions conducted by me/us through the account. I/We declare and undertake that no other person will have any interest of whatsoever nature in the account opened by me/us. Otherwise I/we shall provide the information of the beneficial owner(s) to Fubon.

I understand that the approval of my application to increase the credit limit of my Fubon credit card is subject to the absolute discretion of the Bank.

Principal Cardholder Customer's Signature:

Supplementary Cardholder's Signature (if applicable):

Customer Name :_____
Customer Name :

Date :

Date :

(Please use authorized signature(s) filed with the Bank)

For Bank Use Only		
Checked	Approved	Entered