



CHANGE OF ADDRESS AND CONTACT DETAILS FORM

Name as per NRIC / Passport:		NRIC / Passport Number:	
My New Mailing Address update as follows. (Please fill in the space below):			
Residential Address Update: (Residential address is where you are residing and should not be a in care-of or P.O. Box Address or Office Address)			
Mandatory to select one of the options below:			
<input type="checkbox"/> Same as Mailing Address			
<input type="checkbox"/> Different from Mailing Address, please provide Residential Address in space below:			
Country of domicile - _____			
Please update the above address for the following account and products (Select only <u>ONE</u> option below):			
<input type="checkbox"/> All my Citibank Accounts / Active Relationships (This include all product types):			
<input type="checkbox"/> Inclusive of Citibank Currency Trading Account (Tick here if you have a CCTA account)			
<input type="checkbox"/> All my Credit Cards Only (only for main card holder)			
<input type="checkbox"/> Only Update the following Active Relationship number**:			
<input type="checkbox"/> Inclusive of Citibank Trading Account (Tick here if you have a CCTA account)			
Relationship Title: _____			
Relationship Number: _____			
**The update applies to ALL banking accounts, credit cards and /or inclusive of Citibank Currency Trading account (if ticked) for the relationship number/ title indicated above.			
1. All accounts will be updated if no tick is indicated in any of the boxes.			
2. All changes will supersede the existing information in the Bank's record.			
3. For Joint AND Account(s), signature of all account holders are required.			
New Contact Number Update (Provide Country and Area Code):			
Home:	Office:	Primary Mobile:	Additional Mobile:
New Email Address Update:			
Preferred Email Address:		Alternate Email Address:	
Customer Signature:			
Name: (Main Account Holder)	Name: (Joint Account holder)	Name: (Joint Account holder)	
Date:	Date:	Date:	



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For Bank Use Only (To be completed by staff receiving the instruction):		
<input type="checkbox"/> Face – To – Face <input type="checkbox"/> Customer Number: _____ Signature & ID sighted by: _____ (Name / SOE ID / Signature of service staff) Independent Second Verifier: _____ (Name / SOE ID / Signature of service staff)	<input type="checkbox"/> Mail in instructions (SAMs) Signature verified by: _____ (Name / SOE ID / Signature of SAMs Team) Callback by: _____ (Name / SOE ID / Signature of SAMs Team) Date / Time / Extension: _____ (Name / SOE ID / Signature of SAMs Team)	
FATCA – Residential Address / Mailing Address / Contact Number / Domicile change is to or from USA		
<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.		
CRS – Residential Address / Mailing Address / Contact Number / Domicile change is to or from an oversea country		
<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 SRM / SSM, for their assistance to inform TSO to update address via Margin Man.		
APPLICABLE TO OPERATIONS		
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
INACTIVE DORMANT RCCPM 5.3.9.1.4 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)
HIGH RISK COUNTRIES RCCPM 5.3.1.2.8 Is the update of address or contact number to any of the High-Risk countries? (Refer to the list of High-Risk countries)	<input type="checkbox"/> Yes (Perform callback before update)	<input type="checkbox"/> No (Proceed with update)
_____ (Callback officer signature / Name / SOE ID)		
_____ (Date / Time / Extension)		