The Hongkong and Shanghai Banking Corporation Limited, Macau Branch

香港上海滙豐銀行有限公司 澳門分行

ATM Card Services Request Form

Note 注意: 1. Please tick where applicable. 請在適當的地方加上剔號。 2. Information with shading must be completed. 陰影部份的資料必須填寫。 3. *Please delete whichever is not appropriate. * 請刪去不適用者。			
I. Type of Application and Details	申請類別及有關資	타	
Cardholder's Full Name (in Block Letters) 持卡人全名 (用正楷填寫)			
Contact Telephone No. 聯絡電話號碼			
Card Number 卡號碼			ATM Card Issue Number 自動櫃員機卡發卡編號
A. Card Replacement 補發新卡			
Reason for Replacement 補發卡原因	□ Card damaged or bent 原卡損壞或彎曲		
	□ Others (please give details) 其他原因 (請詳細說明)		
	New card to be collected 新卡將於 (1) at		
	□ (2) by mail to your correspondence address. 寄往閣下的通訊地址。		
	(2) by mail to your correspondence address. 司任阁下的进制使机。		
B. Card Cancellation 取消卡			
7007	□ Account is/will be closed 戶□已/將取消		
Reason for Cancellation	□ Not required 不需要		
取消原因	□ Others (please specify) 其他原因 (請說明)		
C. PIN Request 私人密碼申請			
PIN Request	□ PIN Request. 私人密碼申請		
	New PIN to be Collected 新密碼將於		
私人密碼申請	□ (1) at Branch. 分行領取。		
	□ (2) by mail to your correspondence address. 寄往閣下的通訊地址。		
D. Add/Delete Additional Account 加上/取消附屬戶口			
Add/Delete Additional Account (s)	□ *Add / Delete Second Account *加上 / 取消第二戶□ □ *Add / Delete Third Account *加上 / 取消第三戶□		
加上/取消附屬戶口			
E. Card Reactivate 重新啟動卡			
Reactivate ATM Card 重新啟動自動櫃員機卡	□ Reactivate 重新啟動		
For Bank Use Only 銀行專用			
		Replacement Card Charges Authorised Signature and Branch Chop	
II. Signature 簽署			ed Signature and Branch Chop
		☐ Yes ☐ No	
		☐ ID Checked	
		Or	
		☐ Signature Verified	
X Cardholder's Signature 持卡人簽署		Initial:	

ATM113R7-M (05/14)

day 日 / month 月 / year 年

Date 日期