

信用卡服務綜合申請表格

信用卡卡號： L L L L L - L L L L L - L L L L L - L L L L L 客戶姓名： _____	身份證號碼： _____ 澳門手提電話號碼： (853) _____
本人謹通知 貴司辦理以下事宜 (請在適用的格內加上“✓”號)	
<input type="checkbox"/> 更改月結單之通訊地址(請以正楷填寫) (恕不接受郵政信箱、學校宿舍或非本澳地址) _____ _____	
<input type="checkbox"/> 更新聯絡電話 / 電郵地址: (只適用於澳門本地之手機號碼) 電子郵箱： _____ 傳真機 _____ 電 話： (手機) (853) _____ (住宅) _____ (公司) _____	
<input type="checkbox"/> 更換/補發信用卡, 原因為 (卡公司將直接在信用卡戶口收取補發卡費用, 詳情請參閱信用卡服務收費表。請同時退回剪毀之信用卡): <input type="radio"/> 磁帶/晶片損壞(可豁免補發卡費用) <input type="radio"/> 外觀損壞 <input type="radio"/> 卡背簽名錯誤 / 更改卡背簽名 <input type="radio"/> 更改姓名(請附改名契及身份證副本; 不接受臨時身份證) <input type="radio"/> 其他(請註明): _____	
<input type="checkbox"/> 更新身份證明文件 (請附資料副本)	
<input type="checkbox"/> 結餘轉移 (只適用於主卡客戶) 將上列信用卡賬戶內之結餘款項\$ _____ 轉移至本人另一信用卡主卡賬戶 卡號: L L L L L - L L L L L - L L L L L - L L L L L	
<input type="checkbox"/> 申請補發信用卡櫃員機密碼 (附屬卡申請櫃員機密碼必須由主卡簽署, 新密碼將直接寄往主卡客戶的月結單地址)	
<input type="checkbox"/> 取消信用卡 (請同時退回剪毀之信用卡, 包括附屬卡): <input type="radio"/> 取消主卡 (如有附屬卡亦一併取消) <input type="radio"/> 只取消附屬卡, 附屬卡卡號: L L L L L - L L L L L - L L L L L - L L L L L 取消卡原因為: _____ 註: 如 閣下曾授權商戶定時從此信用卡戶口扣取費用, 或有任何自動轉賬安排, 請自行聯絡商戶取消有關安排或更改付款方式。	
<input type="checkbox"/> 申請增加主卡信用額度 (申請增加主卡信用額度, 請同時提供最新工作資料以作審批) 工作資料: <input type="radio"/> 受僱 / <input type="radio"/> 自僱 公司名稱: _____ 月薪: MOP _____ 服務年數: _____ <input type="radio"/> 家庭主婦 <input type="radio"/> 退休	
<input type="radio"/> 長期加/減額 (如申請長期加額, 請同時附上近期財務資料以作審批) 額度由: \$ _____ 調整至: \$ _____	<input type="radio"/> 臨時加額 (最長不超過 30 天): 用途: _____ 額度由: \$ _____ 增加到 \$ _____ 日期: 由 _____ 年 _____ 月 _____ 日 至 _____ 年 _____ 月 _____ 日
<input type="checkbox"/> 調整附屬卡每月額度 (信用額度以 MOP/HKD1,000 為單位, 每月信用限額將於每月結期第一日重設) 附屬卡號碼: L L L L L - L L L L L - L L L L L - L L L L L 額度由: \$ _____ 調整為: \$ _____	
持卡人簽署 (須與原信用卡申請表上之簽署相同)	日期: _____ 年 _____ 月 _____ 日

傳真號碼 : (853) 2878 7479

(如已傳真表格, 則毋須交回。)

信用卡服務綜合申請表格

信用卡卡號: L L L L - L L L L - L L L L - L L L L 客戶姓名: _____	身份證號碼: _____ 澳門手提電話號碼: (853) _____
<input type="checkbox"/> 申請/補發 Priority 會員卡 (適用於 Visa/萬事達白金卡/Visa Signature 卡及商務卡客戶) Priority Pass 會員卡將寄至主卡客戶之月結單之地址。附屬卡(如適用)之 Priority Pass 會員卡將一併寄出。	
手機短訊服務	
<input type="checkbox"/> 登記使用 i-Service 「現金分期」服務短訊密碼 為確保交易安全, 閣下如透過網上服務申請「現金分期」, 需以手機短訊密碼進行認證, 密碼將發往閣下以上填寫之澳門手提電話。	
<input type="checkbox"/> 交易短訊提示服務 為提供更完善的信用卡交易保安服務, 卡公司將對金額在 MOP/HKD5,000 或以上的交易自動發出短訊提示, 而毋須事先申請。交易短訊將發往閣下以上填寫之 澳門手提電話 。 <input type="radio"/> 交易金額達 MOP/HKD500 或以上接收短訊提示 <input type="radio"/> 所有交易金額均接收短訊提示	
交易短訊提示服務只適用於指定交易類別; 短訊提示之交易金額只供參考, 並將省去小數點後的金額, 交易最終上單金額須以月結單上顯示的金額為準。如交易金額不足 MOP/HKD1, 短訊顯示的交易金額將為 MOP/HKD 0; 附屬卡之短訊提示將傳予主卡之手提電話。如客戶因報失或其他原因引致信用卡號碼改變, 上述設定將須重新進行申請。	
卡公司保留收取有關手機短訊服務費用之權利, 及有關手機服務供應商可能對接收手機短訊收取費用, 詳情請向 閣下的手機服務供應商查詢。服務只適用於澳門本地之手機號碼, 請確認 閣下之手機網絡或設定可正常接收手機短訊。 閣下在卡公司登記之手提電話將按上述號碼同步更新。	
<input type="checkbox"/> 設置拒納「超越信用限額」功能 <input type="radio"/> 客戶名下所有中銀信用卡 <input type="radio"/> 只適用於信用卡號: L L L L - L L L L - L L L L - L L L L 本人要求卡公司為上述指定信用卡及附屬卡(如適用)設置拒納「超越信用限額」功能, 以避免因月結單結欠超越用總額時被收取超越信用限額手續費。本人已細閱, 明白及同意拒絕「超額信用限額」功能之條款及細則。	
當拒納「超越信用限額」功能生效後, 卡公司將 拒納該信用卡的主卡及其附屬卡(如適用)任何引致超越信用限額的連線交易。倘因離線交易所產生的交易誌賬(包括但不限於澳門通自動增值服務的交易、非接觸式交易、於飛機或郵輪上的簽賬交易、或直接扣賬交易等)而引致超越信用限額, 卡公司將不會收取 MOP/HKD100 的超越信用限額手續費(以每月結單計算)。 倘沒有設置拒納「超越信用限額」功能, 卡公司可酌情決定信用卡在超越信用限額情況下仍可繼續使用; 如因此引致月結單結欠超越信用總額, 信用卡賬戶或將被收取超越信用限額手續費。	
<input type="checkbox"/> 其他:	
持卡人簽署 (須與原信用卡申請表上之簽署相同)	日期: _____年____月____日
For Bank Use Only 銀行專用: Branch Code: Staff: Attachment: Y ____ Page(s) / N	
For Card Center Use Only 卡中心專用: SV: Input: Check:	

Credit Card Service Application Form

Credit Card No : _ _ _ _ _ - _ _ _ _ _ - _ _ _ _ _ - _ _ _ _ _	ID No : _____
Cardholder Name : _____	Macau Mobile No.: (853) _____

Please proceed with the followings (please "✓" in the appropriate box)

Amend Statement Address (in block letters): (P.O.Box , college hostel or non Macau address will not be accepted)

Update Contact Phone No. / E-mail Address: (applies to Macau mobile network only)

E-mail Address: _____ Fax: _____

Tel: : (Mobile) (853) _____ (Home) _____ (Office) _____

Replace/Reissue the Card due to (replacement card fee will be debited directly to the related credit card account; for details of service fees, please refer to the BOC Credit Cards Fees Schedule. Please cut the defunct card in half and return it to us for disposal) :

Damaged Magnetic strip/Chip Card (charge for replacement is waived)

Card Surface Damaged

Incorrect Signature / Signature Altered

Name Changed (please attach copy of Deed Poll & ID, acknowledgement not accepted)

Others (please specify): _____

Update Identity Document (please attach copy)

Credit Balance Transfer (applies to main cardholder only):

An amount, MOP/HKD _____, carried in the above credit card account will be moved to main card account of the same ID holder, Card No : _ _ _ _ _ - _ _ _ _ _ - _ _ _ _ _ - _ _ _ _ _

Apply for Credit Card's ATM PIN (To apply for replacement Credit Card ATM PIN, application must be under the signature of the main cardholder when applying for ATM PIN for an additional cardholder; the renewed PIN will be sent by post and addressed to the main cardholder only)

Cancel Credit Card (please return both of the main and the additional cards):

Cancel main card (additional card(s), if any, will be cancelled at the same time)

Cancel additional card only, additional card no: _ _ _ _ _ - _ _ _ _ _ - _ _ _ _ _ - _ _ _ _ _

Reason(s) for card cancellation: _____

Note : If you have authorized other merchandises to directly debit or to make autopay from your credit card account, please contact the corresponding merchandises to cancel such arrangement or rearrange the payment method.

Credit limit increase application (please enclose recent job information for credit limit increase application)

Job Information: Housewife Retires Non-contract terms / Self-employed,

Company Name: _____ Monthly Salaries : MOP _____ Years of Service : _____

<input type="radio"/> Permanent credit limit increase / decrease Limit From: \$ _____ To \$ _____ (please enclose recent financial/asset proof for permanent credit limit increase application)	<input type="radio"/> Temporary credit limit increase (no more than 30 dyas): Purpose: _____ Limit From: \$ _____ To \$ _____ Date(dd/mm/yyyy): From / / To / /
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Additional Card Monthly Credit Limit Adjustment (The 「 Monthly Credit Limit 」 will be adjusted by units of MOP/HKD1,000 each and will be reset on the first day of each statement cycle.)

Additional Card No: _ _ _ _ _ - _ _ _ _ _ - _ _ _ _ _ - _ _ _ _ _

Limit From: \$ _____ To \$ _____

Cardholder Signature: (Should correspond with the signature on the Credit Card application form)	Date : dd/ mm/ yyyy
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Fax Number : (853) 2878 7479

Please do not submit faxed amendment form.

Credit Card Service Application Form

Credit Card No : <u> </u> <u> </u> <u> </u> <u> </u> - <u> </u> <u> </u> <u> </u> <u> </u> - <u> </u> <u> </u> <u> </u> <u> </u> - <u> </u> <u> </u> <u> </u> <u> </u>	ID No : _____
Cardholder Name : _____	Macau Mobile No.: (853) _____

Apply/Reissue Priority Pass Card (applicable for Visa /MasterCard Platinum/ Visa Signature/ Business Card Cardholder)

The Priority Pass Card will be sent by post to the main cardholder's statement address. Sub Cardholder's Priority Pass Card will be sent together (if applicable).

SMS Service

「Cash Installment」 SMS Password

BOC Credit Card i-Service provides SMS Password for identity verification for 「Cash Installment」 application, and a SMS Password will be sent to your above given mobile phone.

SMS Transaction Alert

To better protect my card payment transactions, please without first getting my permission send me a short text message via this number each time a spending of or over MOP/HKD5,000 is captured by your systems. The alert SMS will send to your **Macau mobile** filled above.

Whenever the transaction amount is or over MOP/HKD500 send me a message.

Send me a message for all of my transactions.

Short text message Alert service applies only to certain specific card payment transactions. **The Alert message gives only the dollar value of the transaction and is for reference; the full amount can only be found on the relevant monthly statement. For transaction under MOP/HKD1, the value shown on an Alert message will be just MOP/HKD0.** Alert message meant for an additional cardholder will be sent to the registered mobile number of the main cardholder. Whenever a card has been replaced and its account number changed, the cardholder will have to apply to renew the Alert service with the replacement card account number.

Card Centre reserves the right to charge a fee for the SMS Service, and the mobile service provider may also charge a fee for the SMS. For details, please contact your mobile service provider; This service applies only to the local mobile network; please kindly confirm to us your mobile network or setting and whether it can receive SMS. **If you should have maintained more than one card account with us, all your account records will be amended to use one and the same mobile number.**

Set-up opt-out of 「Over-the-limit-Facility」 Function

Applied to customer's all BOC Credit Cards

Applied to BOC Credit Card No: - - -

I request the Company to set up the parameters for my above main and additional credit card(s) (if any) to decline over-the-limit transaction whenever it occurs so as to avoid any charge for Overlimit Handling Fee. I have read, understood and agreed with the Terms & Conditions for opt-out of 「Over-the-limit Facility」 function stated below.

Once the instruction to opt-out of 「Over-the-limit Facility」 function has been processed successfully, the Company will reject any overlimit transaction conducted on the relevant main and additional credit card(s) (if any); **unless they are processed offline (such as, but not limited to, Macau Pass Automatic Add Value Service, contactless transaction, in flight or cruise transactions or recurring payment and so on), then no Overlimit Handling Fee of MOP/HKD100 (per statement cycle) will apply.**

If a cardholder does not opt out of 「Over-the-limit Facility」 function as aforesaid, the Company may exercise its discretion to accept and process any overlimit transaction conducted with the said card. Thereupon an Overlimit Handling Fee will be debited to the account whenever its balance exceeds the 「Combined Limit」 amount specified on the monthly statement.

Note: If there is any conflict or inconsistency between the Chinese and English version, the latter shall prevail.

Others:

Cardholder Signature: (Should correspond with the signature on the Credit Card application form)	Date : dd/ mm/ yyyy
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For Bank Use Only : Branch Code:	Staff:	Attachment: Y _____ Page(s) / N
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For Card Center Use Only : SV:	Input:	Check:
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