

Customer Information Amendment Form (Personal Customer)

For Filing Only
Bank/Branch : 012 /
Customer No. : _____

Please complete and deliver this application form to any branch of Bank of China (Hong Kong) Limited[#] ("the Bank"). The amendments specified in this form shall take effect within 4 working days after this form has been duly completed and signed by you and properly received by the Bank and/or BOC Credit Card (International) Limited ("the Company").

- Notes :
1. Unless otherwise stated, please complete in BLOCK letters, cross the relevant boxes with "☒". If the information provided is incomplete, the application may not be processed in time.
 2. This form is only applicable to the Company and/or the Bank[#] (not applicable to customer holding Payment Account only).

| I. Customer's Information (* Must be Completed) | |
|---|---|
| * Customer's Name | <input type="text"/> |
| * Identification Document | <input type="checkbox"/> Hong Kong ID Card <input type="checkbox"/> Mainland Resident ID Card <input type="checkbox"/> Passport <input type="checkbox"/> Others (Please specify) : _____ Identification Number : <input type="text"/> |
| Applicable to | <input checked="" type="checkbox"/> All Personal accounts/services maintained in the Company & the Bank [#] (if applicable) & BOC Life [#] (if applicable) |

| II. Change of Customer's Name / Authorized signatories, Identity Information and Nationality(Country/Region) | |
|--|--|
| (Please provide supporting documents) | |
| ^ Fill in new name in <u>Both</u> Chinese and English | |
| ^ New Name | Surname (Chinese) <input type="text"/> |
| | First Name (Chinese) <input type="text"/> |
| | Surname (English) <input type="text"/> |
| | First Name (English) <input type="text"/> |
| New Identification Document | <input type="checkbox"/> Hong Kong ID Card (Permanent) <input type="checkbox"/> Hong Kong ID Card (Non-permanent) <input type="checkbox"/> Mainland Resident ID Card <input type="checkbox"/> Passport <input type="checkbox"/> Others (Please specify) : _____ Identification Number: <input type="text"/> |
| Country/ Region of Issue Identification Document | <input type="checkbox"/> Hong Kong, China <input type="checkbox"/> China <input type="checkbox"/> Others (Please specify) : _____ |
| New Issue Date | <input type="text"/> / <input type="text"/> / <input type="text"/> (YYYY/MM/DD) |
| New Expiry Date | <input type="text"/> / <input type="text"/> / <input type="text"/> (YYYY/MM/DD) |
| Nationality (Country/Region) | <input type="checkbox"/> Hong Kong, China <input type="checkbox"/> China <input type="checkbox"/> Others (Please specify) : _____ |

Please turn to next page

| III. Change of Marital Status, Education Level, Business & Occupation (This session is not applicable to joint account [#]) | | | |
|---|---|--|--|
| Marital Status | <input type="checkbox"/> Single | <input type="checkbox"/> Married | <input type="checkbox"/> Divorced |
| Education Level | <input type="checkbox"/> Primary school or below | <input type="checkbox"/> Secondary school | <input type="checkbox"/> Post-secondary or tertiary |
| | <input type="checkbox"/> University degree | <input type="checkbox"/> Postgraduate or above | |
| Monthly Income (HKD) | <input type="checkbox"/> 10,000 below | <input type="checkbox"/> 10,001 – 25,000 | <input type="checkbox"/> 25,001 – 50,000 |
| | <input type="checkbox"/> 75,001 – 100,000 | <input type="checkbox"/> 100,001 – 200,000 | <input type="checkbox"/> 200,000 above |
| Name of Employer/Company | | | Title |
| Business of Employer/Company | <input type="checkbox"/> Catering 1501 | <input type="checkbox"/> Banking (licensed bank in HK) 18011 | <input type="checkbox"/> Medical Treatments 2005 |
| | <input type="checkbox"/> Education Services 2003 | <input type="checkbox"/> Home Services 2056 | <input type="checkbox"/> Land Transportation 1601 |
| | <input type="checkbox"/> Professional Services 2031 | <input type="checkbox"/> Logistics 1699 | <input type="checkbox"/> Retail 1402 |
| | <input type="checkbox"/> Building equipment 1304 | <input type="checkbox"/> Import/Export Trading 1406 | <input type="checkbox"/> Department Store Retail 14021 |
| | <input type="checkbox"/> Security Guards 2033 | <input type="checkbox"/> Beauty Care 2053 | <input type="checkbox"/> Clothing Retail 14025 |
| | <input type="checkbox"/> Advertising/Design 2032 | <input type="checkbox"/> Cleaning Services 2002 | <input type="checkbox"/> Apparel Manufacturing 0401 |
| | <input type="checkbox"/> Administration & Management 2034 | <input type="checkbox"/> Public Administration 2001 | <input type="checkbox"/> Clothing Trading 1406B |
| | <input type="checkbox"/> Others(please specify) : _____ (Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>) | | |
| Occupation | <input type="checkbox"/> Correctional Services 3005 | <input type="checkbox"/> Management or Civilian Personnel 2899 | <input type="checkbox"/> Service Workers(other) 2999 |
| | <input type="checkbox"/> Police 3004 | <input type="checkbox"/> Specialized Skills 2603 | <input type="checkbox"/> Social & Counseling Worker 2607 |
| | <input type="checkbox"/> Education Workers (Post-secondary below) 2602 | <input type="checkbox"/> Cook 32 | <input type="checkbox"/> Associate Professional(Others) 2699 |
| | <input type="checkbox"/> Designers 2509 | <input type="checkbox"/> Senior Management Personnel 2802 | <input type="checkbox"/> Paramedics 2601 |
| | <input type="checkbox"/> Chartered/Trainee Engineers 2504 | <input type="checkbox"/> Blue-collar 34 | <input type="checkbox"/> Housewife or Homemaker 35 |
| | <input type="checkbox"/> Accounting & Financial Professionals 2503 | <input type="checkbox"/> Students 36 | <input type="checkbox"/> Unemployed 37 |
| | <input type="checkbox"/> Medics 2501 | <input type="checkbox"/> Employers/Self-employed 31 | <input type="checkbox"/> Retired 38 |
| | <input type="checkbox"/> Others(Please specify) : _____ (Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>) | | <input type="checkbox"/> Marketing/Trading Agent 2604 |

Declarations :

- I confirm that save for the above amendments, all my other information being kept with the Company and the Bank[#] remain unchanged. In addition, I acknowledge, the above information can be used for the purpose(s) mentioned in the Company's or the Bank's[#] "Data Policy Notice". I can refer to the Company's or the Bank's[#] "Data Policy Notice" or documents under other relevant headings from time to time issued by the Company and the Bank[#] and its associate entities[#] to understand the general policies on the use, disclosure and transfer of personal data.
- Regarding to the changes of all account information for the Bank & BOC Life (if applicable), I agree to the Company to transfer and deliver all information collected as well as this form to the Bank for updating the relevant information of all my relevant accounts. If I am a BOC Life customer, I also agree to the Bank to transfer and deliver the aforesaid information to BOC Life for updating information of all my relevant accounts[#].
- I acknowledge, upon the change of my name in section II (if applicable) of this form taking effect, the credit card(s) held by me under my former name will have to be replaced with card(s) under my new name and a replacement fee of HKD100 will be charged per card.

Remark: [#]Applicable to customer holding any accounts with the Bank and/or credit card customer bound by the "Credit Card Agreement" (in which the Bank is added as a contractual party to the agreement). Also applicable to customer holding any accounts with BOC Life (if any).

Signature :

(Please sign in the box below. Authorized signature must comply with the Company's record)

| For Bank Use Only | |
|-------------------|--|
| Checked | <input type="checkbox"/> S.V. <input checked="" type="checkbox"/> I.V. <input type="checkbox"/> SP1/ SP2/ PEP/ SLB |
| Staff ID | |
| Handled by | |

Date : _____