

[IMPORTANT] DOCUMENTS TO SUBMIT:

- (a) For Singapore Citizen/Permanent Resident: A clear certified true copy of NRIC (front and back) of authorised signatory(s), director(s) and programme administrator(s);
- (b) For Foreigner: A clear certified true copy of passport (with more than 6 months to expiry), employment pass (front and back) & a copy of Bank Statement or Utility Bill or Tenancy Agreement with Stamp duty or correspondence from a Government agency (not more than 3 months) that reflects your current residential address.
- (c) Financial Statements for the last 24 months;
- (d) Company Bank Statements for the last 6 months;
- (e) Certified Extract of Board Resolution as per attached format;
- (f) Other document(s), as required during registration;
- (g) Latest ACRA Bizfile (not more than 6 months).

CARD SCHEME	CORPORATE CARD PROGRAMME	CARD TYPE	CARD FORMAT	LIABILITY	BILLING
<input type="checkbox"/> DINERS CLUB INTERNATIONAL <input type="checkbox"/> MASTERCARD	<input type="checkbox"/> BUSINESS CARD <input type="checkbox"/> PURCHASING CARD <input type="checkbox"/> LODGE CARD	<input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CHARGE CARD	<input type="checkbox"/> PHYSICAL <input type="checkbox"/> VIRTUAL	<input type="checkbox"/> CORPORATE <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> JOINT & SEVERAL	<input type="checkbox"/> CENTRAL BILLING <input type="checkbox"/> INDIVIDUAL BILLING

PARTICULARS OF APPLICANT

REGISTERED NAME OF COMPANY		COMPANY REGISTRATION NO.																					
COMPANY NAME TO APPEAR ON CARD (Maximum 19 characters)																							
<table border="1" style="width: 100%; height: 30px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																							
REGISTERED COMPANY ADDRESS																							
SINGAPORE ()																							
PRINCIPAL PLACE OF BUSINESS ADDRESS (if different from Registered Company Address)																							
<input type="checkbox"/> Please TICK if the preferred mailing address is the registered company address																							
SINGAPORE ()																							
NATURE OF BUSINESS		TYPE OF COMPANY																					
		<input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PRIVATE LIMITED <input type="checkbox"/> PUBLIC LIMITED <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> OTHERS: _____																					
PAID-UP CAPITAL	DATE OF INCORPORATION (DD / MM / YYYY)	NO. OF EMPLOYEES	OFFICE TEL NO.																				

PROGRAMME ADMINISTRATOR

On behalf of the Company, I/we confirm the following individual(s) as Programme Administrator(s) to enquire and/or to communicate generally with DCS Card Centre Pte Ltd through its Customer Service Hotline or any other modes of communication in respect of all transactions including but not limited to statement queries, billing queries and payments, card block request, card cancellation request.

Programme Administrator #1

FULL NAME AS PER ID	NRIC / PASSPORT NO.	MOBILE NO. OFFICE TEL NO.
BUSINESS EMAIL ADDRESS	POSITION / DESIGNATION	DATE OF BIRTH (DD / MM / YYYY)

Programme Administrator #2

FULL NAME AS PER ID	NRIC / PASSPORT NO.	MOBILE NO. OFFICE TEL NO.
BUSINESS EMAIL ADDRESS	POSITION / DESIGNATION	DATE OF BIRTH (DD / MM / YYYY)

COMMERCIAL CARDS PAY4BIZ WITHDRAWAL

PRINCIPAL BANK FOR FUND TRANSFER	BANK ACCOUNT NO.
----------------------------------	------------------

DECLARATION BY APPLICANT(S)

1. By signing here, we hereby request DCS Card Centre Pte. Ltd. ("DCS") to open a Corporate Card Account for our Company.
2. We are aware that a Corporate Card Account will be set up under the Company's name and used for the billing transactions as stated in the Terms and Conditions governing the DCS Corporate Card. Such Terms and Conditions can be inspected at DCS' office. Copies of the same will be dispatched to our Company and we agree to be bound by them.
3. We are aware that a Credit Limit will be assigned to this Corporate Card Account and any adjustments to the amount will be solely at the discretion of DCS.
4. For Corporate Liability, we understand and agree that the company will be solely liable for all charges and liabilities incurred in respect of the Corporate Card Account.
5. For Individual Liability, we understand and agree that the card nominee will be solely liable for all charges and liabilities incurred in respect of the Corporate Card Account.
6. For Joint & Several Liability, we understand and agree that the company and the card nominee are joint and severally liable for all charges and liabilities incurred in respect of the Corporate Card Account.
7. We agree that DCS has the absolute discretion to reject our application(s) without assigning any reason thereof.
8. We agree and authorise DCS to credit the Company's bank account as stated in this application for Commercial Cards Pay4BIZ upon DCS' approval. This amount can only be deposited to the Company's bank account and not to other third-party bank account.
9. We confirm that there is no statutory demand issued against the Company and the Company is not engaged in any litigation, arbitration or other legal proceedings or hearings before any court, tribunal, administrative, statutory or governmental or enforcement body department board or agency. We are not aware of any such proceedings pending or threatened by or against the Company or any facts likely to give rise to any of such proceedings after making all reasonable enquiries.
10. We authorise DCS and/or its representatives to conduct due diligence, credit checks and mobile data analytics on the Company, but not limited to its director(s) and shareholder(s) as DCS deems necessary.
11. We warrant that the information herein given by us is true and correct.



Authorised Signature _____

Name _____

NRIC _____

Designation _____

Mobile Phone _____

Date _____



Authorised Signature _____

Name _____

NRIC _____

Designation _____

Mobile Phone _____

Date _____

Company Stamp _____

FOR OFFICIAL USE ONLY		Product Code	App	DCS Code	Staff Code
		Referral Source	Date	Staff Name	