

大新信用卡/現金卡/扣賬卡-遺失/被竊/補發/更改資料通知書
DAH SING CREDIT CARD / CASH CARD / DEBIT CARD – Report Lost / Stolen / Re-issue / Information Amendment Form

卡類別 信用卡 現金卡 扣賬卡
 Card type: Credit Card Cash Card Debit Card

持卡人姓名 身份證/護照號碼
 Name of Cardholder: ID Card/Passport No.:

現金卡/扣賬卡/信用卡主卡*賬戶號碼 附屬卡賬戶號碼
 Cash Card/ Debit Card /Credit Card Principal Card A/C No.: Supplementary Card Account No.:

* 請刪去不適合者。Please delete where inappropriate
 請在適當方格加上 ✓ 號 Please tick where applicable

遺失 / 被竊 LOSS / STOLEN

本人證實上述卡已遺失 / 被竊*。
 I confirm that the above card has been lost / stolen*.

遺失 / 被竊*日期, 地點及時間:
 Time, Date and Place of Loss / Stolen *

- 請補發新卡予本人及扣除一切手續費。
 Please re-issue new card to me & charge all handling fees incurred.
- 請不用另發新卡。
 Please NOT re-issue new card

補發新卡 RE-ISSUE OF CARD

- 請補發上述卡予本人
 Please issue a replacement card of the above card to me.
 (註: 請交回閣下已損毀之舊卡予分行 / 信用卡中心)
 (Note: Please return your damaged Card to Branch / Card Centre)

- 理由: 磁帶失效 / 損壞 尚未收妥
 Reason: Magnetic Stripe Malfunction / Damaged Not yet received
 其他
 Others

補發密碼 RE-ISSUE OF PASSWORD

- 請補發上述卡之自動櫃員機密碼予本人
 Please re-generate ATM Password for the above card to me.

- 理由: 遺忘 尚未收妥
 Reason: Forgotten Not yet received
 其他
 Others

更改通訊地址 / 電話號碼 CHANGE OF RESIDENTIAL/CORRESPONDENCE ADDRESS* / TELEPHONE NUMBER

(請預留七個工作天以供辦理補誌紀錄 Please allow 7 working days for updating bank records)

- 由即時開始 With immediate effect
 由右述日期開始 With effect on

請更改本人(等)之居住/通訊地址 / 電話號碼*如下: Please change my /our residential/correspondence address/telephone number as follows:

居住/通訊地址
 Residential/ correspondence Address

電話號碼 住宅 手提
 Telephone No.: (Residential) (Mobile)

- 本人之永久地址與居住地址不同 (請另附永久地址證明)
 If your permanent address is different from the residential address, please provide proof of your permanent address.

更新就業資料 UPDATED OCCUPATION DETAILS

任職公司名稱 業務性質
 Employer's Name: Nature of Business:

任職公司地址
 Business Address:

電話號碼 職位
 Telephone: Position:

任職現公司年期 每月收入
 Years of Service Monthly Income

S.V.

持卡人簽署 Signature of Cardholder 日期 Date
 (請用留存本行之印鑑簽署 Please use the signature(s) filed with the Bank)

銀行專用 FOR BANK USE ONLY												
FOR RECEIVING BRANCH (REPORT LOST / STOLEN TO CARD CENTRE AT 28288)					FOR CARD CENTRE							
Branch Name	Staff name	Name of Card Centre Staff	Date	Time	INP	CK	DF	CX/RJ	CL	UPD	AGT	AP