創興銀行有限公司
Chong Hing Bank Limited

致　：信用卡中心
To　：Credit Card Centre

信用卡自動櫃員機服務指示 Credit Card ATM Facilities Instruction(s)

請將已填妥之表格傳真至 3768 1818 或寄回香港郵政總局信箱 11339 號或交回就近創興銀行分行。
Please return the completed form either by fax to 3768 1818 or by post to G.P.O. Box 11339, Hong Kong or by visiting your nearest Chong Hing Bank Branch.

持卡人姓名 Cardholder's Name		日間聯絡電話號碼 Day Time Contact Telephone Number(s)	
信用卡號碼 Credit Card Number	⌊⌋⌊⌋⌊⌋⌊⌋ - ⌊⌋⌊⌋⌊⌋⌊⌋ - ⌊⌋⌊⌋⌊⌋⌊⌋ - ⌊⌋⌊⌋⌊⌋⌊⌋		

本人欲更改上述信用卡賬戶於自動櫃員機所提供之服務如下〔請於適當方格內加上 ✓ 號〕：
I wish to change the ATM facilities of the above credit card account as below (please place ✓ in the appropriate box(es)) :

❑ *新增／刪除 (*請刪去不適用者) 本人以下之創興銀行**往來賬戶**：
*ADD / DELETE (*please delete as inappropriate) my Chong Hing Bank **Current Account** listed below:

往來賬戶號碼
Current Account Number (DDA) ⌊⌋⌊⌋⌊⌋**1**⌊**0**⌋⌊⌋⌊⌋⌊⌋⌊⌋⌊⌋

簽署
Signature _____ SV

❑ *新增／刪除 (*請刪去不適用者) 本人以下之創興銀行**儲蓄賬戶**：
*ADD / DELETE (*please delete as inappropriate) my Chong Hing Bank **Savings Account** listed below:

儲蓄賬戶號碼
Savings Account Number (SAV) ⌊⌋⌊⌋⌊⌋**2**⌊**0**⌋⌊⌋⌊⌋⌊⌋⌊⌋⌊⌋

簽署
Signature _____ SV

本人明白及同意按照創興銀行有限公司（「銀行」）所訂定的創興咭章則及條款使用自動櫃員機服務。
I understand and agree that the usage of the ATM facilities is subject to the Chong Hing Cards Terms and Conditions of Chong Hing Bank Limited (the "Bank").

X _____

持卡人簽署 Cardholder's Signature
日期 Date:

備註 Remarks:
(1) 簽署須與信用卡申請表記錄相符。
Signature must conform to that on the credit card application form.

(2) 新增之賬戶並不適用於聯名及公司賬戶。
The additional account(s) is / are not applicable to joint name accounts and company accounts.

銀行專用 For the Bank's Use Only (RCCB)		
SV	**INP**	**VER**
Sign	Sign	Sign