



致 : 信用卡中心
To : Credit Card Centre

更新信用卡持卡人身份證明文件 / 姓名表格
Credit Card Cardholder Change Identification Document / Name Form

此表格必須由持卡人本人填寫及簽署授權。請親身携同身份證明文件〔如身份證、宣誓書等〕交回就近創興銀行分行。
THIS FORM MUST BE COMPLETED AND AUTHORIZED BY THE CARDHOLDER WHO MUST SUBMIT THE FORM TOGETHER WITH IDENTIFICATION DOCUMENT (E.G. IDENTITY CARD, AFFIDAVIT, ETC.) TO YOUR NEAREST CHONG HING BANK BRANCH IN PERSON.

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	□□□□ - □□□□ - □□□□ - □□□□

請選擇服務 Please select service(s):

更改身份證明文件 CHANGE IDENTIFICATION DOCUMENT

前用身份證明文件 Former ID Document

新更改身份證明文件 New ID Document

香港身份證 HKID / 護照 Passport

香港身份證 HKID / 護照 Passport

號碼 Number : _____

號碼 Number : _____

護照簽發國家 Passport Issuing Country : _____

護照簽發國家 Passport Issuing Country : _____

更改姓名 CHANGE NAME

前用姓名 Former Name

新更改姓名 New Name

中文 Chinese : _____

中文 Chinese : _____

英文 English : _____

英文 English : _____

注意: 本行將為閣下補發一張以上述新更改姓名打印之新卡。新卡將經郵遞寄至閣下之月結單地址。屆時, 請將舊卡剪斷交回。(補發新卡費用將直接由上述信用卡賬戶扣除。)

NOTE: WE SHALL REISSUE A NEW CREDIT CARD EMBOSSED WITH THE ABOVE NEW NAME TO YOU. THE REPLACEMENT CARD WILL BE MAILED TO YOUR STATEMENT ADDRESS. PLEASE THEN CUT AND RETURN THE OLD CARD. (REPLACEMENT CARD FEE WILL BE DEBITED FROM YOUR ABOVE CREDIT CARD ACCOUNT DIRECTLY.)

更改授權簽署式樣 CHANGE AUTHORIZED SIGNATURE SPECIMEN

新簽署式樣 New Signature Specimen : _____

生效日期 Effective Date : 即時 Immediate

X

持卡人簽署 Cardholder's Signature

日期 Date:

銀行專用 For the Bank's Use Only					
BRANCH			RCCB		
PRE	CHK	APP	SV	INP	VER
Sign	Sign	Sign	Sign	Sign	Sign