


Hong Kong All-In-One (“HKAI0”) Card Dormant Account Reactivation Form

“香港一卡通”賬戶睡眠狀態解除申請表

Please complete in BLOCK LETTERS and where applicable. 請以正楷填寫並在適當處加 記號

Customer Details 客戶資料	
Hong Kong All-In-One Card Account No. 香港一卡通賬號: 621299860 _____	
Name in Chinese 中文姓名: _____	Name in English 英文姓名: _____
Telephone No. 電話號碼: _____	Identification Document No. 證件號碼: _____
Important Notice 重要提示	
<p>1. This form is merely for the reactivation of dormant account. 本表格僅適用於解除賬戶睡眠狀態。</p> <p>2. Any update of your identification document information must be done at CMB Hong Kong branch in person. 更改證件資料需親臨招商銀行香港分行辦理。</p> <p>3. Please update your address or other contact information such as telephone number, email address via “CMBHK Personal Internet Banking Professional Edition” or fill in the “Request Form for Change of Customer Information”. 請通過「招商銀行香港分行個人銀行專業版」或填寫《“香港一卡通”客戶資料更改申請表》更改個人資料，包括地址、電話、電子郵箱等。</p>	
Account Holder Acknowledgement 賬戶持有人聲明	
<p>1. I agree that the request above is subject to your approval. 本人同意上述要求需經貴行審批。</p> <p>2. I agree that the Bank shall not be held responsible for any delay or failure in effecting my instruction above where such delay or failure is attributable (whether directly or indirectly) to any cause beyond the Bank’s control and under no circumstances shall the Bank be responsible to me for any consequential or indirect losses arising out of or in connection with its carrying out or otherwise of my instruction above. 本人明白當貴行執行本人以上的指示時，若遇到任何非貴行所能控制的情況而令貴行(直接或間接)無法執行該指示，貴行毋須負責；另外，貴行因執行或不能執行本人上述的指示而令本人引致的任何相應或間接的損失，貴行毋須對本人負責。</p>	
Signature of Account Holder 賬戶持有人簽署:	<div style="text-align: center;">  </div> Date 日期:
<p>Please send this original form to 21/F Bank of America Tower, 12 Harcourt Rd, Central, Hong Kong. 請將本表格正本送往香港中環夏慤道 12 號美國銀行中心 21 樓。</p> <p>We will process within 7 business days upon receipt of this form. 本行將在收到表格後 7 個工作日內作出處理。</p>	
For Bank Use Only 銀行專用	
內地	經辦簽章: _____ 受理網點名稱: _____ 受理日期: _____ #如客戶通過內地網點提交本表格，內地經辦員簽章後須複印一份副本交客戶備查。
香港	處理情況 同意，處理人/ 聯繫人: _____ 聯繫日期及時間: _____
	不同意，處理人: _____ <input type="checkbox"/> 簽名不符 <input type="checkbox"/> 無法聯繫 <input type="checkbox"/> 資料過期 <input type="checkbox"/> 其他: _____
備註:	