辉 立
PHILLIP SECURITIES PTE LTD
A Member of PhillipCapital
250 North Bridge Road #06-00 Raffles City Tower Singapore 179101
Tel 6533 6001   Fax: 6535 3834   www.phillip.com.sg
Co. Reg. No. 197501035z   GST Reg. No. M2-0021956-2

SHARE BUILDERS PLAN SUSPENSION/ INVESTMENT RE-ACTIVATION / ACCOUNT TERMINATION FORM*

1. PARTICULARS OF ACCOUNT HOLDER

SBP Client's Name: (Mr/Mrs/Ms/Mdm/Dr/Others_____ _)   NRIC/Passport No:

SBP Account Number:

TR Code: _____

2. SUSPENSION OR RE-ACTIVATION OF INVESTMENT INSTRUCTIONS

I/ We hereby request Phillip Securities Pte Ltd to suspend/ re-activate* my/ our Investment Instructions by giving you no less than six (6) business days' advance notice. I/ We have received, read and fully understood the Terms and Conditions governing Phillip Share Builders Plan and agree to be bound by such Terms and Conditions.

The effective date of the suspension/ re-activation* of my/ our SBP account is _____ month _____ year.

_____   _____   _____
 Account Applicant's Signature   **Joint Applicant's Signature**   **Date**

* Please delete accordingly.

3. TERMINATION OF INVESTMENT INSTRUCTIONS

I/ We hereby request Phillip Securities Pte Ltd to terminate my/ our Investment Instructions by giving you no less than six (6) business days' advance notice. I/ We have received, read and fully understood the Terms and Conditions governing Phillip Share Builders Plan and agree to be bound by such Terms and Conditions.

Reason for termination: ☐   Handling fees too expensive

☐   Not satisfied with the service

☐   This product no longer meets my investment objectives

☐   Others:_____

☐ Transfer of SBP shareholdings to CDP A/C No:_____
☐ Withdrawal of all cash balances after changes and quick cheque deposit into the following bank :

☐   Bank Name:_____, Acct No:_____

☐   Others:_____

The effective date of such termination of my/ our account is _____ month _____ year.

_____   _____   _____
 Account Applicant's Signature   **Joint Applicant's Signature**   **Date**

FOR OFFICIAL USE ONLY

Received by: _____
 Signature / Date
Name:
Designation:

Verified by: _____
 Signature / Date
Name:
Designation:

_____
Processed by SBP Ops
Name:
Date:

Remarks:

Checked by:

_____
Name:
Date:

POEMS/SBP/V2.0
JAN 2011