DBS IDEAL™
MAINTENANCE FORM (FOR SUBMISSION TO BANK)

Please complete this form in BLOCK LETTERS.

Company Name* _____   Organisation ID* _____

3 **ADD NEW USER**   *Mandatory Fields

Tick where applicable ☐

| ☐ Admin Officer | ☐ Contact Person | | ☐ Admin Officer | ☐ Contact Person |

User 1

User Name* _____

KTP/Passport No.* _____

Nationality* _____

Date of Birth (DD/MM/YYYY)* _____

Preferred IDEAL™ User ID
(8-12 alphanumeric characters, ie. A-Z, 0-9) _____

Office No. _____

Email Address* _____

Mobile No.* _____

Service(s) & Role(s)

☐ Transaction

Service(s) \ Role(s)	Transaction Maker	Transaction Authoriser	Please indicate authoriser group for this user: (e.g. A, B, C, D, or E, if applicable to Authorisation Policy)
Payment			
Payroll			Verifier / Releaser
Trade			☐ Transaction Verifier
Others			☐ Transaction Releaser

☐ Enquiry   ☐ Trade Access   ☐ DealOnline

Other Specific Instructions

_____

Access to which Account(s)?

☐ All IDEAL™ Accounts   **OR**   ☐ The Accounts Listed Below

_____

User 2

User Name* _____

KTP/Passport No.* _____

Nationality* _____

Date of Birth (DD/MM/YYYY)* _____

Preferred IDEAL™ User ID
(8-12 alphanumeric characters, ie. A-Z, 0-9) _____

Office No. _____

Email Address* _____

Mobile No.* _____

Service(s) & Role(s)

☐ Transaction

Service(s) \ Role(s)	Transaction Maker	Transaction Authoriser	Please indicate authoriser group for this user: (e.g. A, B, C, D, or E, if applicable to Authorisation Policy)
Payment			
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Trade			☐ Transaction Verifier
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☐ Enquiry   ☐ Trade Access   ☐ DealOnline

Other Specific Instructions

_____

Access to which Account(s)?

☐ All IDEAL™ Accounts   **OR**   ☐ The Accounts Listed Below

_____

Company Stamp

Authorised Person signatories required

SIGN HERE _____   SIGN HERE _____

✕ DBS