

Amendment / Supplement to Application

I/We would like to submit the following application to Metis Global (Singapore) Pte. Limited for the purposes of effecting the following amendments to Plan Number [].

Category	Details of Amendment /Supplement Information																								
<input type="checkbox"/> Personal Details of the Applicant(s)	<p>Change of Residential Address</p> <p><input type="checkbox"/> 1. New Address: [Redacted]</p> <p>Postal Code: [Redacted] Country: [Redacted] State: [Redacted]</p> <p><input type="checkbox"/> 2. New Correspondent Address: [Redacted]</p> <p>Postal Code: [Redacted] Country: [Redacted] State: [Redacted]</p> <p><input type="checkbox"/> 3. Change Contact Number</p> <p>Mobile: [Redacted] Home: [Redacted] Office: [Redacted] ext [Redacted]</p> <p><input type="checkbox"/> 4. Change Email Address</p> <p>Email Address: [Redacted]</p>																								
<input type="checkbox"/> Plan Details	<p><input type="checkbox"/> 1. Change Contribution Terms: [Redacted] years</p> <p><input type="checkbox"/> 2. Contribution Frequency</p> <p><input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual</p> <p><input type="checkbox"/> 3. Change Contribution Amount: [Redacted]</p> <p><input type="checkbox"/> 4. Change Payment Method:</p> <p><input type="checkbox"/> Bank Transfer <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/> Giro</p>																								
<input type="checkbox"/> Asset Choice(s)	<table border="1"> <thead> <tr> <th>No.</th> <th>Fund Code</th> <th>Fund Code</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>[Redacted]</td> <td>[Redacted]</td> <td>%</td> </tr> <tr> <td>2.</td> <td>[Redacted]</td> <td>[Redacted]</td> <td>%</td> </tr> <tr> <td>3.</td> <td>[Redacted]</td> <td>[Redacted]</td> <td>%</td> </tr> <tr> <td>4.</td> <td>[Redacted]</td> <td>[Redacted]</td> <td>%</td> </tr> <tr> <td>5.</td> <td>[Redacted]</td> <td>[Redacted]</td> <td>%</td> </tr> </tbody> </table>	No.	Fund Code	Fund Code	Percentage	1.	[Redacted]	[Redacted]	%	2.	[Redacted]	[Redacted]	%	3.	[Redacted]	[Redacted]	%	4.	[Redacted]	[Redacted]	%	5.	[Redacted]	[Redacted]	%
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5.	[Redacted]	[Redacted]	%																						
<input type="checkbox"/> Cancellation before Plan Issuance	<p>I/we would like to cancel my/our plan application.</p>																								
<input type="checkbox"/> Others	<p>Please specify:</p>																								

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Declaration by Applicant(s)

I/We declare and agree that the above statement(s) is/are to be considered as a part of my/our application for the Plan. All my/our answers in the course of the said application are still true, correct, complete and not misleading in any way.

Full Name of the Main Applicant		Full Name of the Joint Applicant	
Signature of the Main Applicant		Signature of the Joint Applicant	
Date Signed		Date Signed	