



# APPLICATION FOR CHANGING INFORMATION

I. Account Holder's Information												
Individual/Institutional customer (Capital letter):												
Date of birth:	Nationality:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female										
ID/Passport/Business registration number:												
Place of issue:	Date of issue:	Date of expiry:										
Securities trading account number												
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">5</td> <td style="width: 20px; text-align: center;">8</td> <td style="width: 20px; text-align: center;">C</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>			0	5	8	C						
0	5	8	C									
II. Information Changes												
<b>1. Change the name of Individual/Institutional customer:</b> <input type="checkbox"/> New name: .....												
<b>2. Change ID/Business registration number:</b> <input type="checkbox"/> New ID/Business registration number: ..... <input type="checkbox"/> Date of issue: ..... <input type="checkbox"/> Place of issue: .....												
<b>3. Change the contact address:</b> <input type="checkbox"/> New contact address: ..... .....												
<b>4. Change the telephone number:</b> <input type="checkbox"/> New landline telephone number: ..... <input type="checkbox"/> New mobile phone number: .....												
<b>SMS Notification Service</b> <input type="checkbox"/> Sending SMS messages to telephone number: .....												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #e0e0e0;"> <th style="width: 50%; text-align: center; padding: 5px;">Telecom tariffs will be applicable when FPTTS charges for SMS</th> <th style="width: 50%; text-align: center; padding: 5px;">Free SMS</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;"><input type="checkbox"/> Balance statement at the beginning of the trading day</td> <td style="padding: 5px;"><input type="checkbox"/> Corporate actions notification</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Order-matching result notification</td> <td style="padding: 5px;"><input type="checkbox"/> Margin trading service notification</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;"><input type="checkbox"/> Other notifications from FPTTS</td> </tr> </tbody> </table>			Telecom tariffs will be applicable when FPTTS charges for SMS	Free SMS	<input type="checkbox"/> Balance statement at the beginning of the trading day	<input type="checkbox"/> Corporate actions notification	<input type="checkbox"/> Order-matching result notification	<input type="checkbox"/> Margin trading service notification		<input type="checkbox"/> Other notifications from FPTTS		
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<b>5. Change the email address:</b> <input type="checkbox"/> New email address .....												
<b>6. Methods of receiving monthly account statements</b> <input type="checkbox"/> Email address: ..... <input type="checkbox"/> Registered mail: .....												
III. Online Trading Password												
<input type="checkbox"/> Ordinary password	<input type="checkbox"/> Token Card Token card Serial No.: ..... Date of receipt: ..... Expiration date: .....											
IV. Online Money Transfer Service												

EzTransfer – The service for placing money transfer orders via Internet

Transfer to any account

(Applied to Token Card users only)

Transfer to the recipient below:

**Account holder**

Full name: .....

ID/Passport No.: ..... Place of issue: ..... Date of issue: .....

Account No. 1: .....

Account No. 2: .....

At Bank: .....

At Bank: .....

At Bank Branch: .....

At Bank Branch: .....

Province/City: .....

Province/City: .....

**Attorney**

Full name: .....

ID/Passport No.: ..... Place of issue: ..... Date of issue: .....

Account No. 1: .....

Account No. 1: .....

At Bank: .....

At Bank: .....

At Bank Branch: .....

At Bank Branch: .....

Province/City: .....

Province/City: .....

**V. Other Contents**

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.....  
.....  
.....

**VI. Specimen Signature Changes**

Attorney		Account holder	
Old signature	New signature	Old signature	New signature

**VII. Effective Date**

Changes herein are effective from: ..... o'clock, day ..... month ..... year .....

Day ..... month ..... year .....

**ACCOUNT OFFICER**  
(Signature, full name)

**FPT SECURITIES JOIN STOCK COMPANY**  
(Signature, full name, seal)

**ACCOUNT HOLDER**  
(Signature, full name, seal)