



THE SINGAPORE POLICE CO-OPERATIVE SOCIETY LTD

UEN No: S26CS0004D | GST Registration No. M90369498G
 250 Sims Avenue #04-01 SPCS Building Singapore 387513
 Tel: 63348055 | Fax: 63348497 | Phone Banking: 63345670
 Website: www.policecoop.org.sg | Email: dpo@policecoop.org.sg

PERSONAL DATA CHANGE REQUEST FORM		
Please provide a clear copy of the front and back of your NRIC/ FIN for verification.		
FULL NAME (As in NRIC) - As registered with the Society		
NRIC/ FIN NO. (Please circle S, T, F or G and enter last 3 digits & alphabet)		
S / T / F / G	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please complete only the sections(s) which you will like us to update.		
CHANGE IN IDENTITY INFORMATION		
(Please provide information below and enclose a clear copy of your NRIC/ Work Permit/ Deed Poll for verification.)		
NEW FULL NAME (As in NRIC)		
NEW NRIC/ FIN NO. (Please circle S, T, F or G and enter last 3 digits & alphabet)		
S / T / F / G	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADDRESS DETAILS		
RESIDENTIAL ADDRESS (As in NRIC)		
MAILING ADDRESS (if different from above)		
CONTACT DETAILS		
HOME (CONTACT NO.)	OFFICE (CONTACT NO.)	MOBILE (CONTACT NO.)
EMAIL		
BANK ACCOUNT DETAILS		
(Please provide a copy of the first page of your bank book/ statement for verification. A new GIRO form has to be submitted if your contributions/ payments are made via GIRO.)		
NAME OF BANK/ BRANCH	ACCOUNT NO.	



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CONSENT TO PROCEED

- i) I declare and confirm that the personal data that I have provided on this form in connection with the Personal Data Change Request is accurate and complete.
- ii) I consent to the collection, use and disclosure of the data for the purpose of complying with my Personal Data Change Request.
- iii) I enclose my proof of identity.
- iv) I further understand that Police Co-op reserves the right to decline to fulfill my Data Change Request as may be permitted under the Personal Data Protection Act 2012.

APPLICANT'S SIGNATURE

DATE (DD/MM/YYYY)

FOR OFFICIAL USE

RECEIVED BY :

DATE :

PD CHANGE REQUEST NO. :

REMARKS :

END OF FORM