

Data Change Request Form – Corporate

Please ensure that all fields are mandatorily filled by you in CAPITAL BLOCK letters before signing.

Date (DD) / (MM) / (YYYY)
 CIF number _____
 Name of the company _____
 Trade license number _____

Please update my address in your records:

Office address

Company name _____
 Municipal makaan No. _____
 Building name _____
 Street number/name _____
 Nearest landmark _____
 P.O. Box number _____
 Emirate _____

Correspondence address

Company name _____
 Municipal makaan No. _____
 Building name _____
 Street number/name _____
 Nearest landmark _____
 P.O. Box number _____
 Emirate _____

Please update my contact details in your records:

Office phone number _____ Ext. _____
 Mobile number _____
 Preferred email address _____

We authorize Mr/Ms _____ (full name), _____ (designation), with Emirates ID number _____, of our company to (a) collect correspondence/documents meant to be delivered by Deem to our company (b) collect WPS cards for our company’s employees enrolled under WPS (c) provide confirmations on deposit opening/closing/premature withdrawal and pay out transactions and (d) Labour Guarantee opening/closing transactions.

Important Note: All products, services and procedures of Deem are subject to the Deem terms and conditions, copy of which is available at Deem offices or may be viewed on Deem’s website at www.deem.io. Fees and charges may apply for the services or requests sought, as per the tariff of fees and services available on Deem website.

Authorised signatory (1) SIGN HERE

Authorised signatory (2) SIGN HERE



For office use only

Request number _____
 Received on _____ Ext. _____
 Sales centre received at _____
 Received by (name) _____

Signature of receiver SIGN HERE

Document copy/ies attached? Trade license Emirates ID