

Merchant Logo

DirectDebit AUTHORIZATION FORM



IMPORTANT NOTE: ALL FIELDS WITH (*) ARE MANDATORY. PLEASE USE CAPITAL LETTERS, BLACK INK AND ☑ ON THE RELEVANT BOXES.

FOR ACCOUNT HOLDER'S COMPLETION

Type of Application * New Application Maintenance Termination

Account Holder's Name (Primary) *

ID Number (without '-' or '/') * New IC Passport Old IC Business Reg.

Saving, Current or Card Account No (without '-' or '/') *

Telephone Number Bank Abbreviation * (Refer to Guideline for abbreviation list)

E-Mail

Purpose of Payment *

Maximum amount to debit per transaction (RM)* - (Subject to maximum limit specified by the DD Operator)

Maximum frequency * Mode of frequency * Daily Weekly Monthly Yearly

Effective Date * (DDMMYY) Expiry Date (DDMMYY)

Declaration:

- I/We hereby acknowledge that the information in this form will be disclosed or released to the Corporation, Corporation's bank and the Direct Debit Operator for the purpose of the Direct Debit collection.
- I/We hereby acknowledge that a fee/charge will be charged to me/us in the event my/our Account has insufficient balance to make Direct Debit payment instruction(s). I/We hereby agree the Bank to debit related fees/charges from my/our Account as a consequence of having insufficient fund for Direct Debit payment(s).
- I/We hereby confirm that I/we have checked the accuracy and correctness of the details furnished by me/us in this application form and I/we are aware of the content and the scope of the services provided therein.
- I/We hereby declare that all information provided is to the best of my/our knowledge true and correct.
- I/We hereby agree to be bound by the Terms and Conditions.
- This Direct Debit authorization will remain in force until terminated by I/we with prior written notice sent to Bank/Corporation.
- I/We hereby authorise the Bank to debit my/our Account for the Direct Debit payment(s) including the relevant transaction fees/charges not payable by the Corporation.

Signature / Company Stamp* _____ Date (DDMMYY)
Account Holder's Signatures as per Bank's record
(For Joint Account - Signature as per Bank's signing condition)

FOR CORPORATION'S COMPLETION

Billor ID * Date (DDMMYY)

Payment Reference No. (e.g. Policy No., etc.) (Must be unique) *

NOTE : THIS SECTION/PORION IS CUSTOMIZEABLE BY CORPORATION

Prepared By (Name) : _____

Signature : _____

Company Stamp/ Logo (Optional)

BANK ABBREVIATION LIST



No.	Bank Abbreviation	Bank Name	ID
1.	CIMB	CIMB Bank Berhad	BCBB0235
2.	BIMB	Bank Islam Malaysia Berhad	BIMB0340
3.	BKRM	Bank Kerjasama Rakyat Malaysia Berhad	BKR1602
4.	CITI	Citibank Berhad	CIT0217
5.	DBB	Deutsche Bank Malaysia Berhad	DBB0219
6.	HLBB	Hong Leong Bank Berhad	HLB0224
7.	HSBC	HSBC Bank Malaysia Berhad	HSBC0222
8.	MBB	Malayan Banking Berhad	MBB0227 MB2U0227
9.	OCBC	OCBC Bank Malaysia Berhad	OCBC0229
10.	PBB	Public Bank Berhad	PBB0233
11.	RHB	RHB Bank Berhad	RHB0218
12.	SCB	Standard Chartered Bank Malaysia Berhad	SCB0214
13.	BOFA	Bank of America (M) Berhad	BOFA0207
14.	JPMC	J.P. Morgan Chase Bank	JPMC0215

- Above Abbreviation List mainly for DDA form setup and Bank ID for FI which has participated in Direct Debit & FPX.