

SAMPLE

**PARTICULAR OF APPLICANT**

Corporation's Name : MOBILE MONEY INTERNATIONAL SDN BHD

Applicant's Name : A B U A L I

New IC NO : 6 6 0 8 2 1 0 6 8 5 4 2      Old IC/Passport No : B 2 8 3 9 4 5 6 7

Business Registration No :      Contact No : 0 1 2      3 4 5 6 7 8 9

Address : N o 3 5 , J A L A N P A R I T  
1 1 4 5 7 K U A L A K E D A D  
K E D A H

Poscode : 1 1 4 5 7      State : K E D A H

Account No : 1 2 3 4 5 6 8 9 9 0      Branch : K U A L A K E D A H

**PARTICULAR OF PAYMENT**

Purpose of Payment : TOP UP

Payment Reference No. 1 :      Effective Date : 0 3      2 0 0 9  
(Month) (Year)

Payment Reference No. 2 :      End Date :                           
(Month) (Year)

Maximum Amount to Debit : 3 0 0 0       Unlimited

(In words)

No. of Frequency (Fill in numeric) :      Times       Daily       Weekly       Monthly       Quarterly       Half Year       Yearly       Unlimited  
 (The related frequency mode)

**Declaration:**

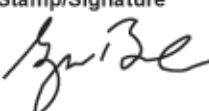


- I/We hereby authorize you to debit my/our account for the above payment instruction/s.
- The authorization will remain in forces until terminated by your written notice sent to my address last known to you or upon receipt of my/our written revocation
- I/We hereby acknowledged that the information in this form will be disclosed or released to the corporation and corporation bank for the purpose of eCollection payment.
- I/We hereby declared that all information provided is to the best of my/our knowledge true and correct
- I/We hereby agreed and shall be bound the Terms and Conditions specified in the form.

Applicant Account Name

Primary : A B U A L I

Secondary :

Applicant Company Stamp/Signature

Primary :   

Secondary :

- Note:
- For corporate account, all authorised signatories to sign and company rubber stamp required.
  - All joint Account Holder are to sign

**FOR CORPORATION'S COMPLETION**

Company's Name : MOBILE MONEY INTERNATIONAL SDN BHD

Business Registration No : 6 7 0 7 6 6 - W

Date :      (D D M M Y Y)

Company's Chop :      Authorised Signatory(s) :      (Authorised Signatory Name)

**FOR BANK USE ONLY**

This above signatures has been verified based on the:

- Company Board Resolution dated
- Signature Verification System (SVS)
- Signature Verified by the Home Branch (copy of branch verification attached)

This application is hereby : (Please ✓ the following)

- Approved
- Rejected (Please ✓ the following)
  - Signature/Thumbprint differ from Bank's record
  - Signature/Thumbprint incomplete/unclear
  - Account operated by different signature
  - Wrong Account Number
  - Amendment/s not countersigned by applicant
  - Others \_\_\_\_\_

Prepared by :      Signature Verified by :  
Name :      Name :  
PF No. :      PF No. :  
Date :      (D D M M Y Y)

Prepared by :      Authorised by :  
Name :      Name :  
PF No. :      PF No. :  
Date :      (D D M M Y Y)