AUTO PAYBILLS ENROLMENT FORM /
BORANG PENDAFTARAN AUTO PAYBILLS

Please use black ink pen and write in BLOCK LETTERS ONLY.
Sila guna pen dakwat hitam dan tulis dalam HURUF BESAR SAHAJA.

Name / *Nama*

Credit Card No. / *No. Kad Kredit* (Maybankard Visa / MasterCard)

Expiry Date / *Tarikh Tamat Tempoh*
(mm / *bb*) – (yy / *tt*)

NRIC No. (old) / *No. KP (lama)*

NRIC No. (new) / *No. KP (baru)*

Address / *Alamat*

Postcode / *Poskod*

Home Tel. No. / *No. Tel. Rumah*

Office Tel. No. / *No. Tel. Pejabat*

H/P No. / *No. Tel. Bimbit*

Maybankard Touch 'n Go Zing

☐ Yes, I would like to apply for a Maybankard Touch 'n Go Zing Auto Reload * / *Ya, saya ingin memohon Kad Maybankard Touch 'n Go Zing Tambah Nilai Automatik **

Collect at Maybank branch / *Pengambilan di cawangan Maybank* :

* Terms & Conditions apply. Refer to www.maybank2u.com for details.
* *Tertakluk kepada Terma & Syarat. Rujuk kepada www.maybank2u.com untuk butir-butir lanjut.*

Please fill whichever is applicable / *Sila isi yang mana berkenaan:*

Service Provider / *Pembekal Perkhidmatan*

TM (not applicable for Unifi / *tidak boleh digunakan untuk Unifi*)
Account No. / *No. Akaun*
(1) –
(2) –

Astro
Account No. / *No. Akaun*
(1)
(2)

Tenaga Nasional Bhd
Account No. / *No. Akaun*
(1) –
(2) –

Sarawak Electricity Supply Corporation
Account No. / *No. Akaun*

Indah Water Konsortium
Sewerage Account No. / *No. Akaun Pembentungan*

Municipalities Assessment Services / *Perkhidmatan Taksiran Majlis Perbandaran*

Dewan Bandaraya Kuala Lumpur Assessment Account No. / *No. Akaun* –

Majlis Perbandaran Subang Jaya Assessment Account No. / *No. Akaun*

Majlis Bandaraya Shah Alam Assessment Account No. / *No. Akaun*

Majlis Bandaraya Ipoh Assessment Account No. / *No. Akaun*

Majlis Perbandaran Klang Assessment Account No. / *No. Akaun*

Majlis Perbandaran Kuantan Assessment Account No. / *No. Akaun*

Majlis Perbandaran Seremban Assessment Account No. / *No. Akaun*

Telecommunication Service Provider / *Pembekal Perkhidmatan Telekomunikasi*

Celcom - **A**	Maxis - **B**

(1) H/P No. / *No. Tel. Bimbit* – Code / *Kod*
Account No. / *No. Akaun*

(2) H/P No. / *No. Tel. Bimbit* – Code / *Kod*
Account No. / *No. Akaun*

(3) H/P No. / *No. Tel. Bimbit* – Code / *Kod*
Account No. / *No. Akaun*

Digi - **C**

(4) H/P No. / *No. Tel. Bimbit* – Code / *Kod*
Account No. / *No. Akaun*

Mail the completed form to us or fax it to **03-2715 9440** or call **1300 88 6688.** / ***Poskan borang yang telah diisi atau faks ke 03-2715 9440 atau telefon 1300 88 6688.***

By signing here, I certify that I have read and understood the terms and conditions on this application and agree to be bound by them and agree that I shall only be responsible for my own liabilities and obligations. / *Dengan menandatangani di sini, saya mengesahkan bahawa saya telah membaca dan memahami segala terma dan syarat bersertakan permohonan ini dan bersetuju untuk dikawal dan bersetuju yang saya hanya akan bertanggungjawab untuk liabiliti dan kewajipan saya sendiri.*

⊗ _____
Cardmember's Signature / *Tandatangan Pemegang Kad*

Date / *Tarikh*
(dd / *hh*) – (mm / *bb*) – (yy / *tt*)

For Bank's Use / *Untuk Kegunaan Bank*

☐ By Call Centre / *Melalui Pusat Perhubungan*

Date & Time / *Tarikh & Masa*

PF No. / *No. PF*

Serial No. / *No. Siri*

AP008