

Please complete this form in BLOCK LETTERS.

Sila isikan borang in dengan menggunakan HURUF BESAR.

For Bank Use / Untuk Kegunaan Bank

Branch / Cawangan:

Date Received / Tarikh Diterima:

A/A No. / No. A/A:

CIF No. / No. CIF:

Campaign Code / Kod Kempen:

### IKHWAN CARD-i APPLICATION FORM / BORANG PERMOHONAN IKHWAN KAD-i

Age Eligibility / Kelayakan Umur Principal Card / Kad Utama - 21 years old / 21 tahun Supplementary Card / Kad Tambahan - 18 years old / 18 tahun  
Age Limit / Had Umur - 65 years old / 65 tahun

| APPLICATION TYPE / JENIS PERMOHONAN | DOCUMENTS REQUIRED / DOKUMEN DIPERLUKAN                                                                                                                                                                                                                                                   | IDENTIFICATION DOCUMENT / DOKUMEN PENGENALAN<br>(compulsory for all application type / wajib untuk semua jenis permohonan)           |
|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Salaried / Bergaji                  | a. Latest 1 month salary slip OR Latest EPF Statement OR Latest BE form with official tax receipt / Penyata gaji 1 bulan terkini ATAU Penyata KWSP terkini ATAU Borang BE terkini serta resit cukai rasmi                                                                                 | Copy of NRIC (both sides), supplementary applicants' included / Salinan Kad Pengenalan (depan & belakang), termasuk pemohon tambahan |
| Self-employed / Bekerja Sendiri     | b. Copy of Business Registration, latest 6 months' bank statements and BE Form with official tax receipt / Salinan Pendaftaran Perniagaan, penyata bank 6 bulan terakhir dan Borang BE terkini serta resit cukai rasmi                                                                    |                                                                                                                                      |
| Graduates / Graduan                 | c. Copy of Degree Certificate/Professional Qualification and employment letter OR 1 month salary slip / Salinan Ijazah/Kelayakan Profesional dan surat tawaran kerja ATAU penyata gaji 1 bulan                                                                                            |                                                                                                                                      |
| Expatriates / Pekerja Asing         | d. Letter of employment confirming duration of employment contact in Malaysia and Visa Work permit. Applicant must be a Maybank account holder / Surat daripada majikan mengesahkan tempoh kontrak pekerjaan di Malaysia dan Permit Kerja. Pemohon mesti merupakan pemegang akaun Maybank | Copy of passport, supplementary applicants' included / Salinan pasport, termasuk pemohon tambahan                                    |

| CARD TYPE / JENIS KAD                             | GOLD<br>MAYBANK ISLAMIC PETRONAS IKHWAN VISA GOLD CARD-I/MAYBANK ISLAMIC MASTERCARD IKHWAN GOLD CARD-I/MAYBANK ISLAMIC IKHWAN AMERICAN EXPRESS® GOLD CARD-I | PLATINUM<br>MAYBANK ISLAMIC PETRONAS IKHWAN VISA PLATINUM CARD-I/MAYBANK ISLAMIC MASTERCARD IKHWAN PLATINUM CARD-I/MAYBANK ISLAMIC IKHWAN AMERICAN EXPRESS® PLATINUM CARD-I | PREMIUM<br>MAYBANK ISLAMIC IKHWAN VISA INFINITE CARD-I/MAYBANK ISLAMIC WORLD MASTERCARD IKHWAN CARD-I |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| Minimum Annual Income / Pendapatan Tahunan Minima | RM30,000                                                                                                                                                    | RM60,000                                                                                                                                                                    | RM100,000                                                                                             |

Note / Nota:

Documents submitted are non-returnable. Additional documents may be requested (when necessary) upon processing. Approval is subject to the Bank's credit assessment and the Bank has the right not to disclose reasons for declining. / Dokumen yang dihantar tidak akan dikembalikan. Dokumen tambahan mungkin diminta (jika perlu) semasa pemprosesan. Kelulusan tertakluk kepada penilaian kredit Bank dan Bank berhak untuk tidak mengemukakan alasan bagi penolakan.

I/We wish to apply for (please tick where applicable) / Saya/Kami ingin memohon (sila tandakan yang mana berkenaan):

Note: **P**-Principal / Utama, **S**-Supplementary / Tambahan (Supplementary should follow Principal card type / Kad Tambahan perlu mengikuti jenis Kad Utama)

**Credit Card / Kad Kredit**

|                                                      | P                        | S                        |                                                   | P                        | S                        |
|------------------------------------------------------|--------------------------|--------------------------|---------------------------------------------------|--------------------------|--------------------------|
| MAYBANK ISLAMIC PETRONAS IKHWAN VISA GOLD CARD-I     | <input type="checkbox"/> | <input type="checkbox"/> | MAYBANK ISLAMIC AMERICAN EXPRESS® GOLD CARD-I     | <input type="checkbox"/> | <input type="checkbox"/> |
| MAYBANK ISLAMIC PETRONAS IKHWAN VISA PLATINUM CARD-I | <input type="checkbox"/> | <input type="checkbox"/> | MAYBANK ISLAMIC AMERICAN EXPRESS® PLATINUM CARD-I | <input type="checkbox"/> | <input type="checkbox"/> |
| MAYBANK ISLAMIC MASTERCARD IKHWAN GOLD CARD-I        | <input type="checkbox"/> | <input type="checkbox"/> | MAYBANK ISLAMIC VISA INFINITE CARD-I              | <input type="checkbox"/> | <input type="checkbox"/> |
| MAYBANK ISLAMIC MASTERCARD IKHWAN PLATINUM CARD-I    | <input type="checkbox"/> | <input type="checkbox"/> | MAYBANK ISLAMIC WORLD MASTERCARD CARD-I           | <input type="checkbox"/> | <input type="checkbox"/> |
| OTHERS / LAIN-LAIN                                   | <input type="checkbox"/> | <input type="checkbox"/> |                                                   |                          |                          |

### 1 APPLICANT PERSONAL INFORMATION / MAKLUMAT PERIBADI PEMOHON

Salutation / Gelaran

☐ Mr / Encik ☐ Mdm / Puan ☐ Ms / Cik ☐ Others / Lain-lain

Gender / Jantina ☐ Male / Lelaki ☐ Female / Perempuan

Nationality / Warganegara ☐ Malaysia ☐ Others / Lain-lain

Name to appear on card / Nama untuk dicetak pada kad  
(Maximum 19 characters / Tidak melebihi 19 huruf)

Name as in NRIC or Passport / Nama seperti di dalam Kad Pengenalan atau Pasport

NRIC No. (New) / No. KP (Baru)  -  -

NRIC No. (Old) / No. KP (Lama)

Passport No. / No. Pasport

Date of Birth / Tarikh Lahir  -  -

Mother's Name / Nama Ibu

(Personal security verification / Pengesahan keselamatan peribadi)

Race / Bangsa

Marital Status / Taraf Perkahwinan

☐ Single / Bujang ☐ Married / Berkahwin

☐ Widow / Balu ☐ Divorced / Berceraai

House Tel. No. / No. Tel. Rumah

HP No. / No. Tel. Bimbit

E-Mail / E-Mel (Mandatory / Mandatori)

Residential Address / Alamat Kediaman

Postcode / Postkod

City / Bandar  State / Negeri

Residential Status / Taraf Kediaman

☐ Own / Sendiri ☐ Tenant / Sewa

☐ Parents' / Milik Ibu Bapa

☐ Others / Lain-lain

Education Level / Tahap Pendidikan

☐ Primary / Pendidikan Rendah

☐ Secondary / Pendidikan Menengah

☐ Masters / Ijazah lanjutan

☐ Professional Qualification / Kelayakan Profesional

☐ Diploma / Diploma

☐ Degree / Ijazah

☐ Doctorate / Kedoktoran

## 2 APPLICANT EMPLOYMENT INFORMATION / MAKLUMAT PEKERJAAN PEMOHON

Name of Employer or Firm / Nama Majikan atau Firma \_\_\_\_\_

Occupation / Pekerjaan \_\_\_\_\_

Occupation Sector / Sektor Pekerjaan \_\_\_\_\_

Business Classification / Klasifikasi Perniagaan

☐ Sole Proprietorship / Milik Sendiri

☐ Partnership / Perkongsian

☐ MNC/Public Listed / MNC/Senarai Awam

☐ Sdn Bhd

☐ Government / Kerajaan

☐ Others / Lain-lain

Employment Type / Jenis Pekerjaan

☐ Labour Force / Tenaga Buruh

☐ Employed / Pekerja Tetap

☐ Employer / Majikan

☐ Government Employee / Kakitangan Kerajaan

☐ Private Employee / Pekerja Swasta

☐ Reporting Entity (RE) Employee / Kakitangan Entiti Pelaporan

☐ Self-employed/Own Account Worker / Pekerjaan Sendiri

☐ Unpaid Family Worker / Pekerja Keluarga Tanpa Gaji

Length of Service / Tempoh Perkhidmatan \_\_\_\_\_

Office Address / Alamat Pejabat \_\_\_\_\_

Postcode / Poskod \_\_\_\_\_

City / Bandar \_\_\_\_\_

State / Negeri \_\_\_\_\_

Office Tel. No. / No. Tel. Pejabat \_\_\_\_\_

Terms of Employment / Terma Pekerjaan

☐ Contract / Kontrak

☐ Permanent / Tetap

☐ Unemployed / Tiada Pekerjaan Tetap

☐ Outside Labour Force / Bukan Tenaga Buruh

### SECTION A / SEKSYEN A

Gross Monthly Income / Pendapatan Kasar RM \_\_\_\_\_

Other Monthly Commitment\*\* / RM \_\_\_\_\_

Tanggungan Bulanan Lain\*\*

Total / Jumlah

RM \_\_\_\_\_

Note / Nota:

Please enclose other evidence of income (if any) eg: ASB/FD Certificate/Tenancy Agreement/Tabung Haji, etc. / Sila lampirkan bukti pendapatan lain (jika ada), contoh: ASB/Sijil Simpanan Tetap/Perjanjian Sewaan/Tabung Haji, dll.

\*\*Non-Financial Institutions related e.g. Monthly instalment to finance the purchase of washing machine or furniture from "Consumer Electronics and Furniture Retailers" / Berkaitan dengan Institusi Bukan Kewangan, contoh: Ansuran bulanan untuk pembelian mesin basuh atau perabot dengan "Peruncitan Pengguna Elektrik dan Perabot".

### SECTION B / SEKSYEN B

When tenure requested is beyond retirement age, to provide source of income / Sila nyatakan sumber pendapatan, sekiranya tempoh pembiayaan melebihi umur persaraan

☐ EPF / KWSP

☐ Savings/FD/ASB / Simpanan/FD/ASB

☐ Rental Income / Pendapatan Sewa

☐ Others / Lain-lain \_\_\_\_\_

### PARTICULARS OF EMERGENCY CONTACT (NEAREST RELATIVE) / BUTIR-BUTIR HUBUNGAN KECEMASAN (SAUDARA TERDEKAT)

Name / Nama \_\_\_\_\_

HP No. / No. Tel. Bimbit \_\_\_\_\_

### STATEMENT & CARD DELIVERY / PENGHANTARAN PENYATA AKAUN & KAD

All statements will be sent via e-mail\*\* / Semua penyata bulanan akan dihantar melalui e-mel\*\*

\*\*I hereby confirm that this is my valid e-mail for statement delivery / Dengan ini saya mengesahkan bahawa ini alamat e-mel saya yang sah untuk penghantaran e-penyata.

Note / Nota: For Maybank2u user, you can view your monthly statements via Maybank2u website www.maybank2u.com.my / Bagi pengguna Maybank2u, sila semak penyata bulanan anda melalui laman sesawang www.maybank2u.com.my

☐ I want my hardcopy statement to be mailed to me at RM1 per month / Saya ingin penyata bercetak saya dikirimkan pada kadar RM1 sebulan

Card will be sent to the following address. This is inclusive of all correspondence and hardcopy statement (if applicable): (please tick ONE only) / Penghantaran kad akan mengikut alamat berikut. Ini termasuk surat-menyurat dan penyata bercetak (jika berkenaan): (sila pilih SATU sahaja)

☐ Residential / Rumah

☐ Office / Pejabat

Note / Nota: No card delivery will be made to international and P.O. Box addresses / Penghantaran tidak akan dibuat ke alamat antarabangsa dan alamat P.O. Box

## 3 SUPPLEMENTARY CARDMEMBER INFORMATION / MAKLUMAT AHLI KAD TAMBAHAN

Salutation / Gelaran

☐ Mr / Encik

☐ Mdm / Puan

☐ Ms / Cik

☐ Others / Lain-lain

Name to appear on card / Nama untuk dicetak pada kad

(Maximum 19 characters / Tidak melebihi 19 huruf)

\_\_\_\_\_

Name as in NRIC or Passport / Nama seperti di dalam Kad Pengenalan atau Pasport

NRIC No. (New) / No. KP (Baru)

\_\_\_\_\_

NRIC No. (Old) / No. KP (Lama)

\_\_\_\_\_

Passport No. / No. Pasport

\_\_\_\_\_

Date of Birth / Tarikh Lahir

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

Relationship to Principal Cardmember /

Hubungan dengan Ahli Kad Utama

Facility Limit / Had Kemudahan

☐ I would like to assign \_\_\_\_\_ % or RM \_\_\_\_\_ of my facility limit to my Supplementary Cardmember. / Saya ingin menetapkan \_\_\_\_\_ % atau RM \_\_\_\_\_ daripada had kemudahan saya untuk Ahli Kad Tambahan saya.

Note: Minimum facility limit assigned should not be less than RM1,000. Total combined facility limit cannot exceed the Principal Cardmember's approved facility limit. / Nota: Had kemudahan minima yang ditetapkan tidak boleh kurang daripada RM1,000. Jumlah gabungan had kemudahan tidak boleh melebihi had kemudahan yang diluluskan untuk Ahli Kad Utama.

☐ My Supplementary Cardmember will share my facility limit. / Ahli Kad Tambahan saya akan berkongsi had kemudahan saya.

Residential Address (If other than Principal Cardmember's address) / Alamat Kediaman (jika berbeza dengan alamat Ahli Kad Utama)

Postcode / Poskod \_\_\_\_\_

City / Bandar \_\_\_\_\_

State / Negeri \_\_\_\_\_

Country / Negara \_\_\_\_\_

HP No. / No. Tel. Bimbit \_\_\_\_\_

Occupation / Pekerjaan \_\_\_\_\_

Occupation Sector / Sektor Pekerjaan \_\_\_\_\_

Employment Type / Jenis Pekerjaan \_\_\_\_\_

E-mail / E-mel (Mandatory / Mandatori) \_\_\_\_\_

Monthly Bill / Bil Bulanan

☐ Joint statement - Principal and Supplementary Card activities are combined and sent to Principal Cardmember. / Penyata bersama - Aktiviti Kad Utama dan Kad Tambahan digabungkan dalam satu penyata dan dihantar kepada Ahli Kad Utama.

Note: Statement & card delivery instructions will be as per Principal Cardmember. / Nota: Penghantaran Penyata akaun dan kad akan mengikut arahan Ahli Kad Utama.

☐ Separate statement - Supplementary Cardmember will be sent own statement. / Penyata berasingan - Ahli Kad Tambahan akan menerima penyata sendiri.

☐ Duplicate statement - Supplementary Cardmember will be sent own statement and the copy sent to Principal Cardmember. / Penyata salinan - Ahli Kad Tambahan akan menerima penyata sendiri dan salinan dihantar kepada Ahli Kad Utama.

#### 4 MAYBANK TOUCH 'N GO ZING CARD INFORMATION / MAKLUMAT KAD MAYBANK TOUCH 'N GO ZING

Free Subscription Fee / Yuran Langganan Percuma

☐ YES, I would like the convenience of the Maybank Touch 'N Go Zing and please link to / YA, saya ingin mendapatkan kemudahan Maybank Touch 'N Go Zing dan sila hubungkan ke:

- ☐ MAYBANK ISLAMIC PETRONAS IKHWAN VISA CARD-i  
☐ MAYBANK ISLAMIC MASTERCARD IKHWAN CARD-i  
☐ MAYBANK ISLAMIC WORLD MASTERCARD IKHWAN CARD-i

- ☐ MAYBANK ISLAMIC IKHWAN AMERICAN EXPRESS® CARD-i  
☐ MAYBANK ISLAMIC IKHWAN VISA INFINITE CARD-i

Supplementary Card / Kad Tambahan

☐ YES, I would like the convenience of the Maybank Touch 'N Go Zing and please link to / YA, saya ingin mendapatkan kemudahan Maybank Touch 'N Go Zing dan sila hubungkan ke:

- ☐ MAYBANK ISLAMIC PETRONAS IKHWAN VISA CARD-i  
☐ MAYBANK ISLAMIC MASTERCARD IKHWAN CARD-i  
☐ MAYBANK ISLAMIC WORLD MASTERCARD IKHWAN CARD-i

- ☐ MAYBANK ISLAMIC IKHWAN AMERICAN EXPRESS® CARD-i  
☐ MAYBANK ISLAMIC IKHWAN VISA INFINITE CARD-i

I agree to abide by the terms and conditions of the Touch 'n Go Zing Card (hereinafter referred to as "the Card") and any other terms and conditions imposed by Rangkaian Segar Sdn Bhd (hereinafter referred to as "RSSB") from time to time for the Card facilities. I understand that the Card remains the property of RSSB and must be returned to RSSB upon request. By signing and/or using The Card I agree to be bound by the terms and conditions imposed by the Card and other variations or amendments thereof. I hereby confirm that the Card has an automatic reload amount of RM100, and irrevocably authorise Maybank Islamic Berhad to debit my Maybank Islamic Ikhwan Card-i Account for each reload and the automatic reload fee of RM2 whenever the account balance drops to RM50. In the event that I wish to cancel my Maybank Touch 'n Go Zing, there will be a charge of refund processing fee of RM5 and RM10 for new card replacement. / Saya bersetuju untuk tertakluk kepada segala terma dan syarat syarat telah ditetapkan oleh Kad Touch 'n Go Zing (kemudian dari ini dirujuk sebagai "Kad") serta lain lain terma dan syarat yang telah ditetapkan oleh Rangkaian Segar Sdn Bhd (kemudian dari ini dirujuk sebagai "RSSB") dari semasa ke semasa untuk kemudahan Kad ini. Saya faham bahawa kad ini adalah milik RSSB dan mesti dikembalikan kepada RSSB apabila dikehendaki. Dengan menandatangani dan/atau menggunakan Kad ini, saya bersetuju untuk tertakluk kepada terma dan syarat syarat Kad ini termasuk pindaan kepada terma dan syarat syarat tersebut. Saya mengesahkan permohonan saya untuk Kad ini dengan penambahan automatik bernilai RM100, dan memberi kuasa mutlak kepada Maybank Islamic Berhad untuk mendebit Akaun Maybank Islamic Ikhwan Kad-i saya untuk setiap penambahan dan yuran tambahan nilai automatik sebanyak RM2 apabila baki akaun menurun sehingga RM50. Sekiranya saya membatalkan Kad Maybank Touch 'n Go Zing saya, yuran pemrosesan bayaran balik sebanyak RM5 akan dikenakan, manakala yuran RM10 akan dikenakan untuk mendapatkan kad gantian baru.

Note: No subscription fee for Maybank Islamic PETRONAS Ikhwan Visa Card-i, Maybank Islamic Mastercard Ikhwan Card-i and Maybank Islamic Ikhwan American Express® Card-i only. / Nota: Tiada yuran langganan untuk Maybank Islamic PETRONAS Ikhwan Visa Kad-i, Maybank Islamic Mastercard Ikhwan Kad-i dan Maybank Islamic Ikhwan American Express® Kad-i sahaja.

#### 5 OTHER DETAILS / LAIN-LAIN MAKLUMAT

Please tick ☒ / Sila tandakan ☒

I confirm that NONE of my spouse(s), parents, children and/or siblings are employees of Maybank Islamic Berhad or Malayan Banking Group. / Saya mengesahkan bahawa tiada pasangan, ibu bapa, anak-anak dan/atau adik-beradik saya yang bekerja dengan Maybank Islamic Berhad atau Kumpulan Malayan Banking.

☐ Yes / Ya ☐ No / Tidak, Name / Nama \_\_\_\_\_ Department / Jabatan \_\_\_\_\_

#### 6 DECLARATION / PENGAKUAN

- A. The Bank refers to Maybank Islamic Berhad (as the case may be), being the licensed financial institution offering the facility product(s) referred to in this application form. / Bank adalah merujuk kepada Maybank Islamic Berhad (seperti yang dinyatakan), sebagai institusi kewangan yang dilisensikan untuk menawarkan produk-produk kemudahan yang dirujuk dalam borang permohonan ini.
- B. I/We hereby declare that all the information given by me/us is true and I/we have not withheld any material fact. If any of the information given by me/us becomes inaccurate or misleading or changes in anyway, whether before this application is approved or whilst the financing is outstanding, I/we shall promptly notify the Bank of such changes. / Saya/Kami dengan ini mengaku bahawa semua maklumat yang diberikan oleh saya/kami adalah benar dan saya/kami tidak menyembunyikan apa-apa maklumat. Jika ada mana-mana maklumat yang diberikan oleh saya/kami adalah tidak tepat atau mengelirukan atau berubah-ubah, samada sebelum permohonan ini diluluskan ataupun masih dalam pertimbangan, saya/kami akan memaklumkan mengenai perubahan maklumat tersebut kepada pihak Bank dengan segera.
- C. I/We hereby declare that all the information given including but not limited to information from any financings that I/we have obtained or in the process of obtaining from any financial and non-financial institution is true, accurate and complete and I/we have not withheld any material facts or information in relation thereto. If any information given by me/us becomes inaccurate or there are any material changes in anyway, whether before this application is approved or while this application of financing is outstanding, I/we hereby undertake to notify the Bank of such changes with immediate effect. I/We hereby further declare that I /we do not have any other financing from financial or non-financial institutions other than as declared herein. / Saya/Kami dengan ini mengesahkan bahawa semua maklumat yang diberi, termasuk tetapi tidak terhad kepada maklumat daripada mana-mana pembiayaan yang saya/kami telah peroleh atau dalam proses untuk mendapatkan pembiayaan daripada mana-mana institusi kewangan dan bukan kewangan adalah benar, tepat, lengkap, dan tidak menyembunyikan apa-apa fakta material atau maklumat berhubung dengannya. Jika apa-apa maklumat yang diberikan oleh saya/kami dalam dokumen ini menjadi tidak tepat atau terdapat apa-apa perubahan penting dengan cara apa jua, sama ada sebelum permohonan ini diluluskan atau ketika permohonan pembiayaan ini belum selesai, saya/kami dengan ini mengaku janji untuk memaklumkan pihak Bank tentang perubahan itu dengan serta-merta. Saya/Kami dengan ini mengisytiharkan selanjutnya bahawa saya/kami tidak mempunyai apa-apa pembiayaan lain daripada institusi kewangan atau bukan kewangan lain selain yang diisytiharkan dalam dokumen ini.
- D. I/We shall comply with the Bank's requirements in respect of my/our application and I/we understand that the Bank's offer of the facility shall be subject to the Bank performing the necessary verification. / Saya/Kami akan mematuhi segala keperluan pihak Bank untuk permohonan saya/kami dan saya/kami memahami bahawa tawaran kemudahan oleh pihak Bank adalah tertakluk kepada pengesahan yang diperlukan oleh pihak Bank.
- E. I/We hereby undertake to inform the Bank if I/we and my/our guarantor(s) and my/our immediate family members (parents, spouses and children) are related to any present or future employee(s) of the Bank or the director(s) of the Bank. / Dengan ini, saya/kami mengaku janji akan memberitahu pihak Bank jika saya/kami dan penjamin saya/kami dan ahli keluarga terdekat saya/kami (ibu bapa, suami, isteri dan anak-anak) berkair dengan pekerja Bank atau pengarah Bank pada masa sekarang atau pada masa depan.
- F. I/We are not in default on any accounts with the Bank or other financial institutions or under any legal impediments. / Saya/Kami tidak gagal untuk membuat pembayaran terhadap mana-mana akaun Bank atau institusi-institusi kewangan yang lain atau di dalam mana-mana urusan undang-undang.
- G. This application form and all supporting documents that were submitted to the Bank shall be the sole property of the Bank and the Bank is entitled to retain the same irrespective of whether my application is approved or rejected by the Bank. / Borang permohonan ini dan semua dokumen sokongan yang telah diserahkan kepada pihak Bank adalah hak milik mutlak pihak Bank dan pihak Bank berhak untuk mengekalkan semua dokumen tanpa mengira samada permohonan saya diluluskan atau ditolak oleh pihak Bank.
- H. I/We agree to be bound by the Bank's rules from time to time governing the relevant type of account and financing and that the Bank is entitled to be indemnified in circumstances set out in such rules. / Saya/Kami bersetuju untuk terikat kepada peraturan-peraturan Bank dari semasa ke semasa yang berkaitan dengan jenis akaun dan pembiayaan dan pihak Bank berhak untuk dibayar ganti rugi dalam keadaan yang tertera di dalam syarat-syarat tersebut.
- I. For your convenience, a Short Message System (SMS) will be sent to your mobile number as stated in this form should your financing application be approved by the Bank. / Untuk kemudahan anda, Sistem Pesanan Ringkas (SMS) akan dihantar ke telefon mudah alih anda mengikut nombor yang dinyatakan di dalam borang permohonan ini sekiranya permohonan pembiayaan anda diluluskan oleh pihak Bank.
- J. I/We confirm that I/we shall read the terms and conditions of the Maybank Islamic Ikhwan Card-i Agreement which have been displayed on the Malayan Banking Berhad's website and agree to be bound by them and all future amendments thereto before accepting and receiving the card(s). In the event I/we require a hard copy of the said Maybank Islamic Ikhwan Card-i Agreement, I/we may request for a copy of the same from the Bank. I/We further agree that the Principal Cardmember shall be responsible for all liabilities and obligations of the Principal Cardmember as well as those of the Supplementary Cardmember(s). The Supplementary Cardmember however, shall only be responsible for his/her own liabilities and obligations. The Bank shall reserve the absolute right to approve or reject my/our application as the Bank deems fit without assigning any reason. I/We understand the card(s) remain the property of Malayan Banking Berhad and shall be subject to cancellation with notice and would be returned upon request. / Saya/Kami mengesahkan bahawa saya/kami akan membaca syarat dan peraturan Perjanjian Maybank Islamic Ikhwan kad-i yang telah dinyatakan di laman web Malayan Banking Berhad dan bersetuju untuk mematuhi dan segala pindaan akan datang sebelum menerima dan mengambil kad (kad-kad). Sekiranya saya/kami memerlukan salinan Perjanjian Maybank Islamic Ikhwan kad-i tersebut, saya/kami boleh meminta salinan tersebut daripada pihak Bank. Saya/Kami seterusnya bersetuju bahawa Pemegang Kad Utama hendaklah bertanggungjawab terhadap semua liabiliti dan obligasi Pemegang kad Utama serta pemegang (pemegang-pemegang) kad Tambahan. Walau bagaimanapun, Pemegang Kad Tambahan akan hanya bertanggungjawab terhadap liabiliti dan obligasinya sendiri. Bank mempunyai hak mutlak untuk meluluskan atau menolak permohonan saya/kami sewajarnya tanpa memberikan apa-apa sebab. Saya/Kami faham bahawa kad tersebut masih hakmilik Malayan Banking Berhad dan akan tertakluk kepada pembatalan dengan pemberitahuan awal dan perlu dikembalikan atas permintaan.



K. I/We authorize and consent to the Bank and its representative to obtain information pertaining to this application from any source, including but not limited to credit information, from the Inland Revenue Board (IRB) Authorities, Employees Provident Fund (EPF), other financial institutions, Central Credit Reference Information System (CCRIS), SME Credit Bureau, any other credit reference agencies, any other person, individual and/or entity, as the Bank deems appropriate, without assigning any reason whatsoever. / Saya/Kami memberi kebenaran dan persetujuan kepada pihak Bank dan wakilnya untuk mendapatkan maklumat berkaitan dengan permohonan ini dari mana-mana sumber termasuk dan tetapi tidak terhad kepada maklumat kredit dari Lembaga Hasil Dalam Negeri, Kumpulan Wang Simpanan Pekerja (KWSP), institusi-institusi kewangan yang lain, Sistem Maklumat Rujukan Kredit Pusat (CCRIS), Kredit Biro SME, mana-mana agensi rujukan kredit, individu dan/atau entiti yang dianggap bersesuaian oleh pihak Bank, tanpa perlu menyatakan sebarang alasan.

The Bank is expressly authorised to discuss with my/our present and future employer(s) regarding this application. / Pihak Bank diberi kuasa untuk membincangkan permohonan ini bersama majikan semasa dan majikan masa depan saya/kami.

L. I/We expressly consent to and authorize the Bank to disclose to Bank Negara Malaysia, any other bodies, authorities such as CAGAMAS and debt collection agents, any person(s) in or outside Malaysia including but not limited to companies within the group of the Bank, whether such group of companies are residing, situated, carrying on business, incorporated or constituted within or outside Malaysia, including but not limited to the respective agents, authorized and appointed outsourcing agents for purpose or providing integrated services, maintaining and storing records (financial or otherwise), at any time and without liability, any information and particulars (financial or otherwise) relating to my/our affairs and accounts, financing and conduct thereof for such purposes as the Bank deems fit or appropriate. / Saya/Kami memberi kebenaran dan memberi kuasa kepada pihak Bank untuk mendedahkan apa-apa maklumat dan butiran (kewangan atau lain-lain) yang berkaitan dengan urusan dan akaun saya/kami, pembiayaan dan pengendalian kepada Bank Negara Malaysia, badan-badan lain, pihak berkuasa seperti CAGAMAS, ejen pemungut hutang, mana-mana individu di dalam atau di luar Malaysia termasuk tetapi tidak terhad kepada syarikat-syarikat dalam kumpulan Bank, sama ada kumpulan syarikat tersebut menetap, menjalankan perniagaan, diperbadankan atau ditubuhkan di dalam atau di luar Malaysia, termasuk tetapi tidak terhad kepada ejen-ejen tertentu, ejen khidmat luaran yang diberi kuasa dan dilantik dengan tujuan menyediakan perkhidmatan bersepadu, memelihara dan menyimpan rekod-rekod (kewangan atau lain-lain) pada masa tertentu dan tanpa liabiliti bagi tujuan yang dianggap sesuai oleh pihak Bank.

M. I/We hereby agree and consent for the Bank to request for and to obtain all the personal information and data set forth in this form for the purpose of processing this application and also for all other purposes that are necessary and required in relation to the facility requested for by me/us herein including the transfer, storing and/or disclosing of such personal data to any of our authorised and appointed agents, subsidiaries in or outside Malaysia for the purpose of processing the personal information and data required by the Bank and also for purposes of storage by such agents or subsidiaries. I/We also declare that all personal information and data set forth herein are all true, up-to-date and accurate and should there be any changes to any personal information or data set forth herein; I/we shall undertake to notify the Bank immediately to have the data amended and updated. / Saya/Kami dengan ini bersetuju dan membenarkan pihak Bank untuk meminta dan mendapatkan semua maklumat dan data peribadi yang dinyatakan dalam borang ini bagi tujuan memproses permohonan ini dan juga untuk semua tujuan lain yang diperlukan dan dikehendaki berhubung dengan kemudahan yang diminta oleh saya/kami dalam borang ini termasuk memindahkan, menyimpan dan/atau mendedahkan data peribadi tersebut kepada mana-mana ejen kami yang diberi kuasa dan dilantik, anak syarikat di dalam atau di luar Malaysia bagi tujuan memproses maklumat dan data peribadi yang dikehendaki oleh pihak Bank dan juga tujuan penyimpanan oleh ejen dan anak syarikat tersebut. Saya/Kami juga mengisytiharkan bahawa semua maklumat dan data peribadi yang dinyatakan dalam borang ini adalah benar, terkini dan tepat dan sekiranya terdapat apa-apa perubahan kepada apa-apa maklumat atau data peribadi yang dinyatakan dalam borang ini, saya/kami berjanji untuk memberitahu pihak Bank dengan segera untuk memperbetulkan dan mengemaskini data.

N. On a periodic basis, the Bank, including companies within Maybank Group and its strategic partners or agents (including but not limited to any authorities, merchants and any member of ie Visa International/Mastercard/American Express) ("Other Entities") may have promotional programmes for our esteemed customers. Your consent is required in order for us to disclose, share and process your information/data with other entities. Please tick: / Secara berkala, pihak Bank termasuk syarikat-syarikat dalam Kumpulan Maybank dan rakan strategik atau ejen (termasuk tetapi tidak terhad kepada mana-mana pihak berkuasa, bank-bank saudagar dan mana-mana ahli institusi seperti Visa International/Mastercard/American Express) ("Entiti Lain") mungkin akan mengadakan promosi untuk pelanggan. Kebenaran anda diperlukan supaya kami dapat mendedahkan, kongsi dan proses maklumat/data anda dengan Entiti lain. Sila tanda:

☐ Yes, I/we expressly consent and authorize the Bank to disclose, share and process my/our information/data with the Bank's group of companies and its strategic partners or agents for the purpose of promoting and marketing the financial products offered by the Bank and these Other Entities. / Ya, saya/kami bersetuju memberi kuasa kepada pihak Bank untuk mendedahkan, berkongsi atau proses maklumat/data saya/kami dengan syarikat-syarikat dalam kumpulan pihak Bank dan rakan strategik atau ejen bertujuan untuk promosi atau pemasaran produk-produk kewangan yang ditawarkan oleh pihak Bank dan Entiti lain.

☐ No, I/we do not consent for the Bank to disclose, share and process my/our information/data with the Bank's group of companies and its strategic partners or agents for the purpose of promoting and marketing the financial products offered by the Bank and these Other Entities. / Tidak, saya/kami tidak bersetuju dan memberi kuasa kepada pihak Bank untuk mendedahkan, berkongsi atau proses maklumat/data saya/kami dengan syarikat-syarikat dalam kumpulan pihak Bank dan rakan strategik atau ejen bertujuan untuk promosi atau pemasaran produk-produk kewangan yang ditawarkan oleh pihak Bank dan Entiti lain.

At any time in the future, if I/we wish to have my/our name and address removed from such mailing list, I/we are required to write to the Bank at Maybank Cards Marketing, 39th Floor, Menara Maybank, 100, Jalan Tun Perak, 50050 Kuala Lumpur. / Pada bila-bila masa akan datang, sekiranya saya/kami ingin mengeluarkan nama dan alamat saya/kami dari senarai pengeposan tersebut, saya/kami perlu menulis kepada Bank di Maybank Cards Marketing, 39th Floor, Menara Maybank, 100, Jalan Tun Perak, 50050 Kuala Lumpur.

O. The Bank has informed me and I fully understand that in accordance with prevailing Bank Negara Malaysia Guidelines, if my annual income is RM36,000 or less, I can only hold credit card as a Principal Cardmember for a maximum of two (2) credit card issuers ("Issuers") effective 1 January 2012 ("Maximum Issuer Restriction"). / Pihak Bank telah memaklumkan kepada saya dan saya memahami sepenuhnya mengenai peraturan yang ditetapkan mengikut Panduan Bank Negara Malaysia, bahawa mulai 1 Januari 2012 ("Had Pengeluaran Maksima") sekiranya pendapatan saya ialah RM36,000 setahun, saya hanya dibenarkan untuk menjadi pemegang Utama kad kredit kepada maksimumnya dua (2) pengeluaran kad kredit ("Pengeluar") sahaja.

I hereby declare that I am holding cards from \_\_\_\_\_ (state number) Issuers. /

Saya mengakui bahawa saya memiliki kad daripada \_\_\_\_\_ (sila berikan bilangan) Pengeluar Kad.

Upon the issuance by the Bank of the credit card(s) applied for under this application, I declare that so long as the Maximum Issuer Restriction applies to me. / Saya mengakui dan mengesahkan kewujudan Had Pengeluaran Maksima sekiranya permohonan kad kredit saya akan dikeluarkan oleh pihak Bank mengikut permohonan saya.

(1) I will be holding credit cards from a maximum of two (2) Issuers (including the Bank as an Issuer); but

(2) In the event that I hold credit cards from more than two (2) Issuers (including the Bank as an Issuer), I undertake to ensure that I will comply with the Maximum Issuer Restriction effective 1 January 2012. /

(1) Saya hanya akan memiliki kad kredit daripada maksimumnya dua (2) Pengeluar Kad sahaja (termasuklah pihak Bank yang mengeluarkan kad tersebut); tetapi

(2) Jika saya memiliki kad kredit lebih daripada dua (2) Pengeluar Kad (termasuklah pihak Bank yang mengeluarkan kad tersebut), saya jamin akan mematuhi had pengeluaran Maksima yang akan berkuatkuasa pada 1 Januari 2012.

Signature of Principal Applicant /  
Tandatangan Pemohon Kad Utama

Name / Nama \_\_\_\_\_  
Date / Tarikh \_\_\_\_\_

Signature of Supplementary Applicant /  
Tandatangan Pemohon Kad Tambahan

Name / Nama \_\_\_\_\_  
Date / Tarikh \_\_\_\_\_

#### FOR OFFICE USE / UNTUK KEGUNAAN PEJABAT

Name / Nama FE/CSE/RB/DSE/TSE: \_\_\_\_\_  
PF No. / No. PF: \_\_\_\_\_  
Branch / Cawangan: \_\_\_\_\_  
Branch Code / Kod Cawangan: \_\_\_\_\_  
Tel. No. / No. Tel.: \_\_\_\_\_  
Fax No. / No. Faks: \_\_\_\_\_

Introduced by / Diperkenalkan oleh (Lead Generator)  
PF No. / No. PF: \_\_\_\_\_  
Branch / Cawangan: \_\_\_\_\_  
Branch Code / Kod Cawangan: \_\_\_\_\_  
Tel. No. / No. Tel.: \_\_\_\_\_  
Fax No. / No. Faks: \_\_\_\_\_

## MEMBERSHIP FEES AND CHARGES / YURAN DAN CAJ KEAHLIAN

### A. Annual Fees / Yuran Tahunan

| Maybank Islamic Ikhwan           |                               | Annual Fees / Yuran Tahunan                                                                                                                                                                        |
|----------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Principal / Kad Utama (RM)       | Gold/Platinum / Emas/Platinum | Free / Percuma                                                                                                                                                                                     |
|                                  | Infinite / Infinite           | 1st Year: Free / Tahun Pertama: Percuma<br>Subsequent Year: RM800 (waived with spending of above RM80,000) /<br>Tahun Berikutnya: RM800 (dikecualikan dengan penggunaan melebihi RM80,000 setahun) |
|                                  | World / World                 | 1st Year: Free / Tahun Pertama: Percuma<br>Subsequent Year: RM800 (waived with spending of above RM80,000) /<br>Tahun Berikutnya: RM800 (dikecualikan dengan penggunaan melebihi RM80,000 setahun) |
| Supplementary/ Kad Tambahan (RM) | Gold/Platinum / Emas/Platinum | Free / Percuma                                                                                                                                                                                     |
|                                  | Infinite / Infinite           | Free / Percuma                                                                                                                                                                                     |
| Joining Fee / Yuran Keahlian     |                               | None / Tiada caj                                                                                                                                                                                   |

FREE Maybank Touch 'n Go Zing Card subscription fee for Maybank Islamic Ikhwan. Automatic reload fee - RM2 (each reload). Applicable to Maybank Islamic PETRONAS Ikhwan Visa Card-i, Maybank Islamic Mastercard Ikhwan Card-i and Maybank Islamic Ikhwan American Express® Card-i/ Pengecualian yuran langganan Kad Maybank Touch 'n Go Zing untuk Maybank Islamic Ikhwan. Yuran tambahan nilai automatik - RM2 (setiap kali tambah nilai). hanya untuk Maybank Islamic PETRONAS Ikhwan Visa Kad-i, Maybank Islamic Mastercard Ikhwan Kad-i dan Maybank Islamic Ikhwan American Express® Kad-i.

### B. Actual Monthly Management Charge / Caj Pengurusan Bulanan Sebenar

| Conditions / Syarat<br>Payments Months / Bayaran Bulanan<br>Total 12 Months / Selama 12 Bulan | Actual Management Rate / Kadar Caj pengurusan |                     |
|-----------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------|
|                                                                                               | Per Month / Bulanan                           | Per Annum / Tahunan |
| For prompt payment of 12/12 months / Bayaran segera 12/12 Bulan                               | 1.25%                                         | 15%                 |
| For prompt payment of 10/12 months / Bayaran segera 10/12 Bulan                               | 1.42%                                         | 17%                 |
| For prompt payment of less than 10/12 months / Bayaran segera kurang daripada 10/12 Bulan     | 1.5%                                          | 18%                 |

### C. Actual Cash Withdrawal Management Charge / Caj Pengurusan Pengeluaran Tunai Sebenar

Actual Cash Withdrawal Management Charge is imposed on the outstanding cash withdrawal transaction that is not paid after the payment due date. 18% p.a. or 1.5% p.m. is calculated on a daily basis from the day of withdrawal till full payment is made. A one-time service fee of 5% or a minimum of RM18 will be levied on the amount withdrawn, whichever is higher. / Caj Pengurusan Pengeluaran Tunai Sebenar akan dikenakan ke atas baki belum jelas bagi pengeluaran tunai selepas tarikh matang pembayaran. 18% setahun atau 1.5% sebulan akan dikenakan secara harian dari tarikh pengeluaran dilakukan sehingga tarikh pembayaran penuh dibuat. Yuran perkhidmatan sekali sahaja sebanyak 5% atau minima RM18 akan dikenakan ke atas jumlah yang dikeluarkan, yang mana lebih tinggi.

### D. Balance Transfer / Pemindahan Baki

| Plan / Pelan | Rate / Kadar        |                     |                                                    |
|--------------|---------------------|---------------------|----------------------------------------------------|
|              | Per Month / Bulanan | Per Annum / Tahunan | Minimum transfer amount / Jumlah pemindahan minima |
| 6            | 0.5%                | 6%                  | RM1,000                                            |
| 9            | 0.75%               | 9%                  | RM1,000                                            |
| 12           | 0%*                 | 0%                  | RM1,000                                            |
| 24           | 0.375%              | 4.5%                | RM2,000                                            |
| 36           | 0.413%              | 4.95%               | RM2,000                                            |

Actual Management Charge on the subsequent months for the above plans are up to 17.5% p.a. of the balance amount transferred calculated on a daily basis. / Caj Pengurusan Bulanan Sebenar untuk bulan-bulan seterusnya bagi pelan-pelan di atas adalah sehingga 17.5% setahun bagi baki jumlah yang dipindahkan, dikira atas dasar harian.

\*One time upfront fee of 3% / \*Sekali caj pendahuluan 3%

### E. Fixed Monthly Management Charge / Caj Pengurusan Bulanan Tetap

| Fixed Monthly Management Charge / Caj Pengurusan Bulanan Tetap |                     |                   |
|----------------------------------------------------------------|---------------------|-------------------|
| Gold / Emas                                                    | Platinum / Platinum | Premium / Premium |
| RM7,500                                                        | RM15,000            | RM30,000          |

i. Fixed Monthly Management Charge refers to the maximum charge that will be imposed by the Bank to the Cardmember in relation to the card service dependent on the card type. / Caj Pengurusan Bulanan Tetap merujuk kepada caj maksima yang akan dikenakan oleh pihak Bank kepada Ahli Kad berhubung dengan perkhidmatan kad bergantung kepada jenis kad;

ii. The Bank may at its absolute discretion, at any time or from time to time, grant the Cardmember a rebate (Ibra'), the amount of which will be determined and calculated at the absolute discretion of the Bank. Without prejudice to such discretion, the amount of the rebate (Ibra') if granted will be determined: / Mengikut budi bicara pihak Bank, pada bila-bila masa atau dari semasa ke semasa, memberi rebat (Ibra') kepada Ahli kad yang mana jumlahnya akan ditentukan dan dikira mengikut budi bicara mutlak pihak Bank. Tanpa prejudis terhadap budi bicara mutlakanya, jumlah rebat (Ibra'), sekiranya diberikan, akan ditentukan:

based on the difference between the Fixed Monthly Management Charge and the Actual Monthly Management Charge and/or Actual Cash Withdrawal Management Charge at the relevant Statement Date; or / berdasarkan kepada perbezaan antara Caj Pengurusan Bulanan Tetap dan Caj Pengurusan Bulanan Sebenar dan/atau Caj Pengeluaran Tunai Sebenar pada Tarikh Penyata berkenaan; atau

where the Actual Monthly Management Charge and/or Actual Cash Withdrawal Management Charge on the Current Balance is lesser than the Fixed Monthly Management Charge. / Di mana Caj Pengurusan Bulanan Sebenar dan/atau Caj Pengeluaran Tunai Sebenar pada Baki Semasa adalah kurang daripada Caj Pengurusan Bulanan Tetap.

### F. Late Payment Charge / Caj Bayaran Lewat

If the minimum payment is not made by payment due date, a late payment charge will be levied at 1% of the unpaid retail and cash advances/withdrawal transaction outstanding balance, subject to a minimum of RM10, whichever is higher, up to a maximum of RM100. / Jika pembayaran balik minima tidak dijelaskan pada tarikh matang, caj 1% akan dikenakan daripada baki belum jelas transaksi pembelian runcit dan pengeluaran tunai yang tertunggak pada tarikh penyata akaun, tertakluk pada caj minimum RM10, sehingga tahap maksima sebanyak RM100.

### G. Minimum Monthly Payment / Bayaran Bulanan Minima

5% of the outstanding balance or a minimum of RM25 payment, whichever is higher. / 5% daripada baki belum jelas atau minima RM25, yang mana lebih tinggi.

### H. Card Replacement Due to Lost or Stolen Card, Card Details Disclosure to Third Party or Request Change of New Card Number / Penggantian Kad Disebabkan Kad Hilang atau Dicuri, Pendedahan Maklumat Kad kepada Pihak Ketiga, atau Permohonan Penukaran Nombor Kad Baru

RM50 for each card replaced. / RM50 bagi setiap penggantian Kad.

#### I. Conversion for Overseas Transactions / Tukaran bagi Urus Niaga Luar Negara

Transactions conducted outside Malaysia will be converted to Ringgit Malaysia on the date the transaction is received and/or processed. The converted amount is shown in the Cardmember's statement. The exchange rate may differ from the rate charged on the date of transaction due to market fluctuation. The exchange rate used to convert the transaction made in foreign currency represents a bundling of currency conversion components of 1.25% imposed by Visa International or Mastercard International and 1% or at such other rates imposed by Maybank. / Transaksi-transaksi yang dijalankan di luar negara akan ditukar kepada Ringgit Malaysia pada tarikh transaksi diterima dan/atau diproses. Amaun yang ditukarkan tersebut akan ditunjukkan dalam penyata Pemegang Kad. Kadar pertukaran mungkin berbeza daripada kadar yang dikenakan pada tarikh transaksi disebabkan oleh keadaan turun naik pasaran. Kadar pertukaran yang digunakan untuk menukar transaksi yang dibuat dalam mata wang asing merupakan satu gabungan komponen penukaran mata wang 1.25% yang dikenakan oleh Visa International atau Mastercard International dan 1% atau pada kadar lain yang dikenakan oleh Maybank.

#### American Express® Cards / Kad American Express®

All foreign charges converted by American Express apply a conversion factor of 2.5% to the converted amount. A charge that is made in foreign currency other than U.S Dollars will, when the conversion is done by American Express, be converted into U.S Dollars before being converted in the Cardmember billing currency. / Semua transaksi luar negara yang ditukar oleh American Express akan dikenakan faktor tukaran sebanyak 2.5% kepada amaun yang ditukarkan. Caj yang dibuat dalam matawang asing selain dari Dolar A.S, apabila penukaran dibuat oleh American Express, akan ditukar kepada Dolar A.S sebelum ditukar ke dalam bil matawang Pemegang Kad.

#### J. Service Tax / Cukai Perkhidmatan

The Service Tax of RM25 governed by the Service Tax Act 2018 shall be imposed on each Principal and Supplementary Credit/Charge Cards upon card issuance and card anniversary effective 1 September 2018. Cardmembers may opt to redeem the Service tax with using Maybank Points. / Cukai Perkhidmatan sebanyak RM25 yang tertakluk di bawah Akta Cukai Perkhidmatan 2018 akan dikenakan ke atas setiap Kad Kredit/Caj Kad Utama dan Kad Tambahan semasa Kad dikeluarkan dan pada setiap ulang tahun Kad berkuat kuasa pada 1 September 2018. Ahli Kad mempunyai pilihan untuk menebus Cukai Perkhidmatan dengan menggunakan mata ganjaran Maybank.

|                                                                                                                   |                                                                                                                           |                                                                                                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  Fax to / Faks ke<br>03-2283 6245 |  or call / atau hubungi<br>1 300 88 6688 |  or e-mail to / atau e-mel kepada<br><a href="mailto:maybankcardsales@maybank.com.my">maybankcardsales@maybank.com.my</a> |
|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|





**PDPA Form for Individual Customers**  
**(Borang PDPA Untuk Pelanggan-Pelanggan Individu)**

Please complete in BLOCK LETTERS  
(Sila lengkapkan dengan HURUF BESAR)

Name: \_\_\_\_\_  
(Nama)

Identification Card Number : \_\_\_\_\_  
(Nombor Kad Pengenalan)

In order to process this application and subsequently to continue performing the contractual agreements entered between you and any entity within Maybank Group, we may need to disclose your personal data to other entities within Maybank Group and other external parties. Maybank Group refers to Malayan Banking Berhad ("Maybank"), including its branches in Malaysia and in other countries as well as its local and overseas subsidiaries. The external parties we disclose your personal data to may include but not limited to (1) governmental and regulatory bodies such as Bank Negara Malaysia and Securities Commission; (2) our business strategic partners; and/or (3) agents and/or outsourcing vendors (collectively, "External Parties"). These External Parties may locate, store, maintain and/or process your personal data within or outside of Malaysia.  
(Untuk memproses permohonan ini dan selanjutnya meneruskan pelaksanaan perjanjian-perjanjian kontrak yang dimeterai antara anda dan mana-mana entiti dalam Kumpulan Maybank, kami mungkin perlu mendedahkan data peribadi anda kepada entiti-entiti lain dalam Kumpulan Maybank dan pihak-pihak luar yang lain. Kumpulan Maybank merujuk kepada Malayan Banking Berhad ("Maybank"), termasuk cawangan-cawangannya di Malaysia dan di negara-negara lain serta juga anak-anak syarikat tempatan dan luar negara. Pihak luar yang kami dedahkan data peribadi anda mungkin termasuk tetapi tidak terhad kepada (1) badan-badan kerajaan dan kawal selia seperti Bank Negara Malaysia dan Suruhanjaya Sekuriti; (2) rakan-rakan niaga strategik kami; dan/atau (3) agen-agen dan/atau vendor-vendor penyumberan luar (secara kolektif, "Pihak Luar"). Pihak Luar ini boleh mencari, menyimpan, mengekalkan dan/atau memproses data peribadi anda di dalam atau di luar Malaysia.)

Under the Personal Data Protection Act (PDPA) 2010, we are required to obtain your explicit consent when we collect and process your sensitive personal data. We collect your sensitive personal data in order to assess your application and to administer the products and services that you have signed up for.  
(Di bawah Akta Perlindungan Data Peribadi (PDPA) 2010, kami dikehendaki memperolehi persetujuan jelas anda apabila kami mengumpul dan memproses data peribadi sensitif anda. Kami mengumpul data peribadi sensitif anda untuk menilai permohonan anda dan untuk mentadbirkan produk-produk dan perkhidmatan-perkhidmatan yang anda telah meterai perjanjiannya.)

From time to time, we, other entities within Maybank Group and/ or our strategic partners with whom we have a relationship with for specific products, services and promotions (collectively, "Other Entities") may have information about products, services and promotions that may be of interest to you. To receive such information, your consent is required for us to process, disclose and/or share your information/data with Other Entities. Accordingly, please mark your preference by ticking the appropriate box in the declaration below.

(Dari semasa ke semasa, kami, termasuk entiti-entiti lain dalam Kumpulan Maybank dan/ atau rakan kongsi strategik yang kami mempunyai hubungan berkenaan produk, perkhidmatan dan promosi tertentu (secara kolektif, "Entiti-entiti Lain") mungkin memiliki maklumat tentang produk-produk, perkhidmatan-perkhidmatan dan promosi-promosi yang mungkin menarik minat anda. Untuk mendapatkan maklumat sedemikian, persetujuan anda diperlukan untuk kami memproses, mendedah dan/atau berkongsi maklumat/data anda dengan Entiti-entiti Lain. Selanjutnya, sila letakkan pilihan anda dengan menandakan kotak berkenaan dalam deklaras di bawah.)



**Declaration****(Deklarasi)**

By signing this form, I am declaring that I have read, understood and agree to terms of the Maybank Group Privacy Notice and I am expressly consenting to and authorising Maybank Group:

*(Dengan menandatangani borang ini, saya mengisytiharkan bahawa saya telah baca dan fahami serta bersetuju untuk tertakluk kepada Notis Privasi Kumpulan Maybank dan saya menyatakan persetujuan dan memberi kuasa kepada Kumpulan Maybank:)*

- (i) To request for and to obtain all the personal information and data in this form for the purpose of processing this application and all other purposes which are required in relation to any products, services and promotions offered by Maybank Group;  
*(Untuk meminta dan memperolehi kesemua maklumat dan data peribadi dalam borang ini bagi tujuan memproses permohonan ini dan semua tujuan-tujuan lain yang diperlukan berkaitan dengan mana-mana produk, perkhidmatan dan promosi yang ditawarkan oleh Kumpulan Maybank;)*
- (ii) To disclose my personal data to the Other Entities and External Parties when required for the purposes stated therein; and/or  
*(Untuk mendedahkan data peribadi saya kepada Entiti-entiti Lain dan Pihak Luar apabila dikehendaki bagi tujuan yang dinyatakan didalamnya; dan/atau)*
- (iii) To collect and process my sensitive personal data for the purpose of this application (where applicable).  
*(Untuk mengumpul dan memproses data sensitif peribadi saya untuk tujuan permohonan ini yang mana berkaitan.)*

By signing this form, I/we further confirm that all personal data that I/we have provided are all true, up-to-date and accurate. Should there be any changes to any of my/our personal data, I/we shall notify Maybank Group immediately.

*(Dengan menandatangani borang ini, saya/kami seterusnya mengesahkan bahawa kesemua data peribadi yang saya/kami telah berikan adalah semuanya benar, terkini dan tepat. Sekiranya terdapat apa-apa perubahan pada mana-mana data peribadi saya/kami, saya/kami akan memaklumkan kepada Kumpulan Maybank dengan serta merta).*

With regards to promotional and marketing materials:

*(Berkenaan dengan bahan-bahan promosi dan pemasaran:)*

- ☐ Yes, I/we expressly agree to Maybank Group and/or Other Entities processing my/our personal data for promotional and marketing purposes.  
*(Ya, saya/kami menyatakan persetujuan untuk Kumpulan Maybank dan/atau Entiti-entiti Lain memproses data peribadi saya/kami untuk tujuan promosi dan pemasaran.)*
- ☐ No, I/we do not agree to Maybank Group and/or Other Entities processing my/our personal data for promotional and marketing purposes.  
*(Tidak, saya/kami tidak bersetuju untuk Kumpulan Maybank dan/atau Entiti-entiti Lain memproses data peribadi saya/kami untuk tujuan promosi dan pemasaran.)*

Signature: \_\_\_\_\_  
*(Tandatangan)*

Date: \_\_\_\_\_  
*(Tarikh)*



## FATCA/CRS Individual Self-Certification Form

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                            |                                          |                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------|
| <p><b>Please read these instructions before completing the form.</b></p> <p>Under Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS), Maybank Group is required to collect and report certain information to the local tax authority on the status of our customers.</p> <p>Should there be a change in circumstances relating to information, such as the account holder's tax status or other mandatory field information that makes this form incorrect or incomplete, please let us know by notifying us or providing us with an updated Self-Certification Form.</p> <p>This form must be completed by any individual who wishes to open an account.</p> <p>As a financial institution, we are not allowed to give tax advice. Kindly consult your tax or legal adviser should you have questions on or in relation to FATCA and CRS.</p> |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Part 1 - Identification of Individual Account Holder</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>(For joint or multiple account holders, complete a separate form for each individual account holder)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                            |                                          |                                                |
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                            |                                          |                                                |
| Date of Birth (DDMMYYYY):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                            |                                          |                                                |
| Country of Birth:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| New IC Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Part 2 - FATCA Self Certification</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><u>Definitions applicable</u><br/>         The term U.S. person or United States person means a person described in section 7701(a)(30) of the Internal Revenue Code:<br/>         The term "United States person" means—<br/>             (A) a citizen or resident of the United States</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>Please check "✓" Yes or No for each of the following questions:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Are you a U.S. Citizen?                                                                                                                                                                                                                    | <input type="checkbox"/>                 | <input type="checkbox"/>                       |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Do you hold a U.S. Permanent Resident Card (Green Card)?                                                                                                                                                                                   | <input type="checkbox"/>                 | <input type="checkbox"/>                       |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Are you a U.S. Resident?                                                                                                                                                                                                                   | <input type="checkbox"/>                 | <input type="checkbox"/>                       |
| 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | If you have ticked "No" to all three questions above, then please tick as:                                                                                                                                                                 | <input type="checkbox"/> Non U.S. person |                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | If you have ticked "Yes" to any of the three questions above, please tick as:<br>Please fill up U.S. IRS form W9 ( <a href="https://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103">https://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103</a> ) | <input type="checkbox"/> U.S. person     |                                                |
| <p><b>Part 3 - Jurisdiction of Residence and Taxpayer Identification Number (TIN)</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>Complete the following table indication :<br/>         (a) the jurisdiction of residence where the account holder is a resident for tax purposes (except for Malaysia) and<br/>         (b) the account holder's TIN for each jurisdiction indicated. Indicate All jurisdictions of residence.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>If a TIN is unavailable, indicate which of the following reason is applicable:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Reason A</b> - The jurisdiction where the account holder is a resident for tax purpose does not issue TINs to its residents.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Reason B</b> - The account holder is unable to obtain a TIN.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Reason C</b> - TIN is not required.<br/>         (Note: Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed.)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Country of Tax Residence                                                                                                                                                                                                                   | TIN                                      | If no TIN available, indicate Reason A, B or C |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>Please explain in the following boxes why you are unable to obtain a TIN if you selected <b>Reason B</b> above.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><i>Note: If the account holder is a resident for tax purpose in more than three countries, please use separate sheet.</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Declaration and Signature</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>I represent and declare that the information provided above is true, accurate and complete.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>I understand that the term "U.S. person" means any citizen or resident of the United States.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                            |                                          |                                                |



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>I hereby consent to Malayan Banking Berhad or any of its affiliates, including branches (collectively “the Bank”) disclosing the financial accounts information to regulatory authorities in accordance with the requirements of the Foreign Account Tax Compliance Act and Common Reporting Standard as may be stipulated by applicable laws, regulations, agreements or regulatory guidelines or directives.</p> <p>I hereby agree that the Bank may classify me as reportable account and/or suspend, recall or terminate my account(s) and/or facilities granted to me, in the event I fail to provide accurate and complete information and/or documentation as the Bank may require.</p> <p>I hereby agree that the Bank may withhold from my account(s) such amounts in accordance with the provisions of Foreign Account Tax Compliance Act or as may be stipulated by applicable laws, regulations, agreement or regulatory guidelines or directives.</p> <p>I undertake to notify the Bank in writing within 30 calendar days of any change in circumstances which causes the information contained herein to become incorrect.</p> |                                                                                                                                                                                      |
| Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | _____                                                                                                                                                                                |
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | _____                                                                                                                                                                                |
| Date (dd/mm/yyyy):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | _____                                                                                                                                                                                |
| Capacity:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | _____<br><i>(Indicate the capacity if you are not the individual identified in Part 1. If signing under a Power of Attorney, attached a certified copy of the Power of Attorney)</i> |

## For Office Use

### Reasonable Test:

To be filled by Relationship Manager. Questions below to be considered in conjunction with all documents & forms collected from customers (including this form).

|                                               | U.S. Indicia Status                                                                                                                            | Yes/No | Action required if "Yes"<br>(FATCA Documentation Checklist)                                                                                                                                                                                                                                                                                                                                                          |
|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1                                             | Have the account holder(s) provided a <b>U.S. place of birth</b> ?                                                                             |        | <ul style="list-style-type: none"> <li>If account holder is confirmed U.S person: <ul style="list-style-type: none"> <li>- <b>Form W-9</b> <u>or</u></li> </ul> </li> <li>If account holder is non U.S person: <ul style="list-style-type: none"> <li>- Certificate of Loss of Nationality, <u>and</u> appropriate documentation <sup>N1</sup> <u>or</u></li> <li>- Form W-8BEN <sup>N3</sup></li> </ul> </li> </ul> |
| 2                                             | Have the account holder(s) provided any indication that the account holder(s) are <b>U.S. citizen or resident</b> ?                            |        | <ul style="list-style-type: none"> <li>If account holder is confirmed U.S person: <ul style="list-style-type: none"> <li>- <b>Form W-9</b></li> </ul> </li> <li>If account holder is non U.S person: <ul style="list-style-type: none"> <li>- Appropriate documentation <sup>N1</sup> <u>or</u></li> <li>- Form W-8BEN <sup>N2</sup></li> </ul> </li> </ul>                                                          |
| 3                                             | Have the account holder(s) provided a <b>U.S. address</b> (including P.O. Box)?                                                                |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 4                                             | Have the account holder(s) provided <b>only</b> a <b>U.S. telephone number</b> ?                                                               |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 5                                             | Have the account holder(s) provided a <b>U.S. telephone number</b> <u>and</u> a <b>non U.S. telephone number</b> ?                             |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 6                                             | Have the account holder(s) provided any <b>standing instructions to transfer funds to an account maintained in the U.S.</b> ?                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 7                                             | Have the account holder(s) <b>granted Power of Attorney to a Person with a U.S. address</b> ?                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 8                                             | Have the account holder(s) provided <b>only</b> a <b>U.S. "hold mail" or "in care of" address</b> , that is the sole address for this account? |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Customer(s)' FATCA classification:</b>     |                                                                                                                                                |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Non U.S. person                               |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| U.S. person                                   |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| Recalcitrant customer with U.S. Indicia       |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| Recalcitrant customer without U.S. Indicia    |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| Recalcitrant customer that is U.S. Person     |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| Recalcitrant customer that is dormant account |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |

|   | CRS Indicia Status                                                                                                                                 | Yes/No | Action required if "Yes"<br>(CRS Documentation Checklist)                   |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------------------------------|
| 1 | Have the account holder(s) provided any indication that the account holder(s) are from other <b>Jurisdictions</b> <sup>N3</sup> ?                  |        | Documentary evidence to establish the Account Holder's Jurisdiction status. |
| 2 | Have the account holder(s) provided any other <b>Jurisdiction address</b> (including P.O. Box)?                                                    |        |                                                                             |
| 3 | Have the account holder(s) provided <b>one or more</b> telephone numbers in other Jurisdiction?                                                    |        |                                                                             |
| 4 | Have the account holder(s) provided any <b>standing instructions to transfer funds to an account maintained in other Jurisdictions</b> ?           |        |                                                                             |
| 5 | Have the account holder(s) <b>granted Power of Attorney to a Person with address of other Jurisdiction</b> ?                                       |        |                                                                             |
| 6 | Have the account holder(s) provided <b>"hold mail" or "in care of" address of other Jurisdictions</b> , that is the sole address for this account? |        |                                                                             |



**Notes:**

<sup>N1</sup> Customer can also provide alternative documentation, a form of documentary evidencing citizenship in a country other than the United States, and a reasonable written explanation of the account holder's renunciation of U.S. citizenship at birth in order to establish the account holder's status as a foreign person (i.e. other than U.S.) such as:

- Certificate of residence
- Individual government identification with respect to an individual (e.g. Identification Card)
- Any valid identification issued by an authorised government body (e.g. a government or agency thereof, or a municipality) that is typically used for identification purposes

<sup>N2</sup> In the absence of any appropriate documentation evidencing account holder is non U.S. person, Relationship Manager should obtain form W-8BEN.

<sup>N3</sup> Jurisdictions: Country (ies) other than Malaysia and U.S.

| Declaration and acknowledgement                                                                                                                                           |      |                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----------------|
| I declare that: the required account opening checks have been performed for the customer(s) listed above; and that the information provided is true, correct and updated. |      |                 |
| Staff Name / PF No                                                                                                                                                        | Date | Staff Signature |
|                                                                                                                                                                           |      |                 |

## FATCA/CRS Individual Self-Certification Form

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                            |                                          |                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------|
| <p><b>Please read these instructions before completing the form.</b></p> <p>Under Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS), Maybank Group is required to collect and report certain information to the local tax authority on the status of our customers.</p> <p>Should there be a change in circumstances relating to information, such as the account holder's tax status or other mandatory field information that makes this form incorrect or incomplete, please let us know by notifying us or providing us with an updated Self-Certification Form.</p> <p>This form must be completed by any individual who wishes to open an account.</p> <p>As a financial institution, we are not allowed to give tax advice. Kindly consult your tax or legal adviser should you have questions on or in relation to FATCA and CRS.</p> |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Part 1 - Identification of Individual Account Holder</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>(For joint or multiple account holders, complete a separate form for each individual account holder)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                            |                                          |                                                |
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                            |                                          |                                                |
| Date of Birth (DDMMYYYY):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                            |                                          |                                                |
| Country of Birth:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| New IC Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Part 2 - FATCA Self Certification</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><u>Definitions applicable</u><br/>         The term U.S. person or United States person means a person described in section 7701(a)(30) of the Internal Revenue Code:<br/>         The term "United States person" means—<br/>         (A) a citizen or resident of the United States</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>Please check "✓" Yes or No for each of the following questions:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Are you a U.S. Citizen?                                                                                                                                                                                                                    | <input type="checkbox"/>                 | <input type="checkbox"/>                       |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Do you hold a U.S. Permanent Resident Card (Green Card)?                                                                                                                                                                                   | <input type="checkbox"/>                 | <input type="checkbox"/>                       |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Are you a U.S. Resident?                                                                                                                                                                                                                   | <input type="checkbox"/>                 | <input type="checkbox"/>                       |
| 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | If you have ticked "No" to all three questions above, then please tick as:                                                                                                                                                                 | <input type="checkbox"/> Non U.S. person |                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | If you have ticked "Yes" to any of the three questions above, please tick as:<br>Please fill up U.S. IRS form W9 ( <a href="https://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103">https://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103</a> ) | <input type="checkbox"/> U.S. person     |                                                |
| <p><b>Part 3 - Jurisdiction of Residence and Taxpayer Identification Number (TIN)</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>Complete the following table indication :<br/>         (a) the jurisdiction of residence where the account holder is a resident for tax purposes (except for Malaysia) and<br/>         (b) the account holder's TIN for each jurisdiction indicated. Indicate All jurisdictions of residence.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>If a TIN is unavailable, indicate which of the following reason is applicable:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Reason A</b> - The jurisdiction where the account holder is a resident for tax purpose does not issue TINs to its residents.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Reason B</b> - The account holder is unable to obtain a TIN.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Reason C</b> - TIN is not required.<br/>         (Note: Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed.)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Country of Tax Residence                                                                                                                                                                                                                   | TIN                                      | If no TIN available, indicate Reason A, B or C |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>Please explain in the following boxes why you are unable to obtain a TIN if you selected <b>Reason B</b> above.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                            |                                          |                                                |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><i>Note: If the account holder is a resident for tax purpose in more than three countries, please use separate sheet.</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                            |                                          |                                                |
| <p><b>Declaration and Signature</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>I represent and declare that the information provided above is true, accurate and complete.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                            |                                          |                                                |
| <p>I understand that the term "U.S. person" means any citizen or resident of the United States.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                            |                                          |                                                |



I hereby consent to Malayan Banking Berhad or any of its affiliates, including branches (collectively “the Bank”) disclosing the financial accounts information to regulatory authorities in accordance with the requirements of the Foreign Account Tax Compliance Act and Common Reporting Standard as may be stipulated by applicable laws, regulations, agreements or regulatory guidelines or directives.

I hereby agree that the Bank may classify me as reportable account and/or suspend, recall or terminate my account(s) and/or facilities granted to me, in the event I fail to provide accurate and complete information and/or documentation as the Bank may require.

I hereby agree that the Bank may withhold from my account(s) such amounts in accordance with the provisions of Foreign Account Tax Compliance Act or as may be stipulated by applicable laws, regulations, agreement or regulatory guidelines or directives.

I undertake to notify the Bank in writing within 30 calendar days of any change in circumstances which causes the information contained herein to become incorrect.

|                    |                                                                                                                                                                                      |
|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Signature:         | _____                                                                                                                                                                                |
| Name:              | _____                                                                                                                                                                                |
| Date (dd/mm/yyyy): | _____                                                                                                                                                                                |
| Capacity:          | _____<br><i>(Indicate the capacity if you are not the individual identified in Part 1. If signing under a Power of Attorney, attached a certified copy of the Power of Attorney)</i> |

## For Office Use

### Reasonable Test:

To be filled by Relationship Manager. Questions below to be considered in conjunction with all documents & forms collected from customers (including this form).

|                                               | U.S. Indicia Status                                                                                                                            | Yes/No | Action required if "Yes"<br>(FATCA Documentation Checklist)                                                                                                                                                                                                                                                                                                                                                          |
|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1                                             | Have the account holder(s) provided a <b>U.S. place of birth</b> ?                                                                             |        | <ul style="list-style-type: none"> <li>If account holder is confirmed U.S person: <ul style="list-style-type: none"> <li>- <b>Form W-9</b> <u>or</u></li> </ul> </li> <li>If account holder is non U.S person: <ul style="list-style-type: none"> <li>- Certificate of Loss of Nationality, <u>and</u> appropriate documentation <sup>N1</sup> <u>or</u></li> <li>- Form W-8BEN <sup>N3</sup></li> </ul> </li> </ul> |
| 2                                             | Have the account holder(s) provided any indication that the account holder(s) are <b>U.S. citizen or resident</b> ?                            |        | <ul style="list-style-type: none"> <li>If account holder is confirmed U.S person: <ul style="list-style-type: none"> <li>- <b>Form W-9</b></li> </ul> </li> <li>If account holder is non U.S person: <ul style="list-style-type: none"> <li>- Appropriate documentation <sup>N1</sup> <u>or</u></li> <li>- Form W-8BEN <sup>N2</sup></li> </ul> </li> </ul>                                                          |
| 3                                             | Have the account holder(s) provided a <b>U.S. address</b> (including P.O. Box)?                                                                |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 4                                             | Have the account holder(s) provided <b>only</b> a <b>U.S. telephone number</b> ?                                                               |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 5                                             | Have the account holder(s) provided a <b>U.S. telephone number</b> <u>and</u> a <b>non U.S. telephone number</b> ?                             |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 6                                             | Have the account holder(s) provided any <b>standing instructions to transfer funds to an account maintained in the U.S.</b> ?                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 7                                             | Have the account holder(s) <b>granted Power of Attorney to a Person with a U.S. address</b> ?                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 8                                             | Have the account holder(s) provided <b>only</b> a <b>U.S. "hold mail" or "in care of" address</b> , that is the sole address for this account? |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Customer(s)' FATCA classification:</b>     |                                                                                                                                                |        |                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Non U.S. person                               |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| U.S. person                                   |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| Recalcitrant customer with U.S. Indicia       |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| Recalcitrant customer without U.S. Indicia    |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| Recalcitrant customer that is U.S. Person     |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |
| Recalcitrant customer that is dormant account |                                                                                                                                                |        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                             |

|   | CRS Indicia Status                                                                                                                                 | Yes/No | Action required if "Yes"<br>(CRS Documentation Checklist)                   |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------------------------------|
| 1 | Have the account holder(s) provided any indication that the account holder(s) are from other <b>Jurisdictions</b> <sup>N3</sup> ?                  |        | Documentary evidence to establish the Account Holder's Jurisdiction status. |
| 2 | Have the account holder(s) provided any other <b>Jurisdiction address</b> (including P.O. Box)?                                                    |        |                                                                             |
| 3 | Have the account holder(s) provided <b>one or more</b> <b>telephone numbers in other Jurisdiction</b> ?                                            |        |                                                                             |
| 4 | Have the account holder(s) provided any <b>standing instructions to transfer funds to an account maintained in other Jurisdictions</b> ?           |        |                                                                             |
| 5 | Have the account holder(s) <b>granted Power of Attorney to a Person with address of other Jurisdiction</b> ?                                       |        |                                                                             |
| 6 | Have the account holder(s) provided <b>"hold mail" or "in care of" address of other Jurisdictions</b> , that is the sole address for this account? |        |                                                                             |



**Notes:**

<sup>N1</sup> Customer can also provide alternative documentation, a form of documentary evidencing citizenship in a country other than the United States, and a reasonable written explanation of the account holder's renunciation of U.S. citizenship at birth in order to establish the account holder's status as a foreign person (i.e. other than U.S.) such as:

- Certificate of residence
- Individual government identification with respect to an individual (e.g. Identification Card)
- Any valid identification issued by an authorised government body (e.g. a government or agency thereof, or a municipality) that is typically used for identification purposes

<sup>N2</sup> In the absence of any appropriate documentation evidencing account holder is non U.S. person, Relationship Manager should obtain form W-8BEN.

<sup>N3</sup> Jurisdictions: Country (ies) other than Malaysia and U.S.

| Declaration and acknowledgement                                                                                                                                           |      |                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----------------|
| I declare that: the required account opening checks have been performed for the customer(s) listed above; and that the information provided is true, correct and updated. |      |                 |
| Staff Name / PF No                                                                                                                                                        | Date | Staff Signature |
|                                                                                                                                                                           |      |                 |

## Borang Pengesahan FATCA/CRS - Individu

Sila baca arahan sebelum mengisi borang ini.

Di bawah Foreign Account Tax Compliance Act (FATCA) dan Common Reporting Standard (CRS), Kumpulan Maybank perlu mengumpulkan dan melaporkan maklumat tertentu kepada pihak berkuasa cukai tempatan mengenai status pelanggan kami.

Sekiranya terdapat perubahan yang berkaitan dengan maklumat tersebut, misalannya status cukai pemegang akaun atau maklumat penting lain yang menyebabkan maklumat dalam borang ini menjadi tidak benar atau tidak lengkap, sila kemukakan kepada kami atau serahkan Borang Pengesahan-Individu yang telah dikemaskini.

Borang ini perlu diisi oleh mana-mana individu yang ingin membuka akaun.

Sebagai sebuah institusi kewangan, kami tidak dibenarkan memberi nasihat percukaian. Sila hubungi penasihat cukai atau penasihat undang-undang sekiranya anda ada kemusykilan berkaitan dengan FATCA dan CRS.

### Bahagian 1 - Pengenalan Pemegang Akaun Individu

(Bagi pemegang akaun bersama, sila isi borang berasingan bagi setiap individu pemegang akaun)

|                                    |  |
|------------------------------------|--|
| Nama:                              |  |
| Negara Kelahiran:                  |  |
| Nombor Kad Pengenalan Baru/Pasport |  |

### Bahagian 2 - Pengesahan - Individu FATCA

#### Definisi:

Istilah Individu AS, atau Individu Amerika Syarikat adalah merujuk kepada individu yang dinyatakan dalam seksyen 770

(a)(30) Kod Hasil Dalam Negeri, Istilah "Individu Amerika Syarikat" bermakna—

(A) Warganegara atau pemastautin Amerika Syarikat

Sila tandakan "Ya" atau Tidak bagi setiap soalan yang berikut:

|                                                                                                                                                                                                                                               | Ya                                         | Tidak                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------|
| 1 Adakah anda seorang warganegara AS?                                                                                                                                                                                                         | <input type="checkbox"/>                   | <input type="checkbox"/> |
| 2 Adakah anda mempunyai Kad Pemastautin Tetap AS (Kad Hijau)?                                                                                                                                                                                 | <input type="checkbox"/>                   | <input type="checkbox"/> |
| 3 Adakah anda seorang pemastautin AS?                                                                                                                                                                                                         | <input type="checkbox"/>                   | <input type="checkbox"/> |
| 4 Jika anda menanda "Tidak" kepada ketiga-tiga soalan di atas, sila tandakan sebagai:                                                                                                                                                         | <input type="checkbox"/> Bukan Individu AS |                          |
| Jika anda menanda "Ya" kepada mana-mana daripada tiga soalan tersebut, sila tandakan sebagai:<br>Sila isi borang W9 ( <a href="https://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103">https://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=103</a> ) | <input type="checkbox"/> Individu AS       |                          |

### Bahagian 3 - Negara Pemastautin Cukai dan Nombor Pembayar Cukai (TIN)

Lengkapkan jadual yang berikut:

(a) Bidang kuasa pemastautin yang mana pemegang akaun adalah pemastautin bagi tujuan percukaian (kecuali bagi Malaysia); dan  
(b) TIN pemegang akaun bagi setiap bidang kuasa yang dinyatakan. Nyatakan semua bidang kuasa pemastautin.

Jika tiada TIN, nyatakan salah satu alasan yang berkaitan seperti yang berikut:

**Alasan A** - Pemegang akaun adalah pemastautin bagi tujuan percukaian di dalam Negara yang tidak mengeluarkan TIN untuk pemastautinnya.

**Alasan B** - Pemegang Akaun tidak boleh memperoleh TIN.

**Alasan C** - TIN tidak diperlukan.

(Nota: Pilih alasan C sahaja sekiranya pihak berkuasa cukai tempatan tidak menghendaki TIN dilaporkan.)

|   | Negara Pemastautin Cukai | TIN | Jika TIN tidak diperoleh, nyatakan Alasan A, B atau C |
|---|--------------------------|-----|-------------------------------------------------------|
| 1 |                          |     |                                                       |
| 2 |                          |     |                                                       |
| 3 |                          |     |                                                       |

Jika anda memilih Alasan B, sila nyatakan dalam ruangan yang berikut mengapa anda tidak boleh memperoleh TIN.

|   |  |
|---|--|
| 1 |  |
| 2 |  |
| 3 |  |

**Nota:** Sila gunakan helaian berasingan sekiranya pemegang akaun adalah pemastautin bagi tujuan percukaian lebih daripada tiga negara,

| Deklarasi dan Tanda tangan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Saya mengakui dan mengesahkan bahawa maklumat yang diberikan di atas adalah benar, tepat dan lengkap. Saya faham bahawa istilah "Individual AS" bermakna mana-mana warganegara atau pemastautin Amerika Syarikat.</p> <p>Saya dengan ini membenarkan Malayan Banking Berhad atau mana-mana anggota kumpulannya, termasuk cawangan (secara kolektif dikenali sebagai "Bank") untuk melaporkan maklumat saya kepada pihak berkuasa mengikut peruntukan di bawah Foreign Account Tax Compliance Act dan Common Reporting Standard yang telah ditetapkan oleh undang-undang, peraturan, perjanjian atau garis panduan atau arahan yang berkenaan.</p> <p>Dengan ini, saya membenarkan Bank untuk mengklasifikasikan saya sebagai akaun yang perlu dilaporkan dan/atau menggantung, menarik balik atau menamatkan akaun saya dan/atau kemudahan yang diberikan kepada saya, sekiranya saya gagal memberikan maklumat dan/atau dokumentasi yang tepat dan lengkap sebagaimana diperlukan oleh Bank.</p> <p>Dengan ini, saya membenarkan Bank untuk menahan sejumlah amaun dari akaun saya mengikut peruntukan di bawah Foreign Account Tax Compliance Act yang telah ditetapkan oleh undang-undang, peraturan-peraturan, perjanjian, garis panduan atau arahan yang berkenaan.</p> <p>Saya bertanggungjawab untuk memaklumkan pihak Bank secara bertulis dalam tempoh 30 hari kalendar jika terdapat sebarang perubahan kepada maklumat yang telah saya berikan kepada pihak Bank berubah menjadi tidak benar.</p> |                                                                                                                                                                                                                        |
| Tanda tangan:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                        |
| Nama:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                        |
| Tarikh (hari/bulan/tahun):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                        |
| Kapasiti:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <p><i>(Nyatakan kapasiti anda jika anda bukan individu yang dikenal pasti dalam Bahagian 1. Sekiranya ditandatangani di bawah Surat Kuasa Wakil, sila lampirkan salinan Surat Kuasa Wakil yang telah disahkan)</i></p> |



## Untuk Kegunaan Pejabat

### Ujian Wajar

Untuk diisi oleh Pengurus Perhubungan. Soalan di bawah untuk dipertimbangkan bersama-sama dengan semua dokumentasi dan borang yang dikumpul daripada pelanggan (termasuk borang ini).

|                                                      | Status <i>Indicia</i> AS                                                                                                                            | Ya/Tidak | Tindakan Diperlukan jika “Ya”<br>(Senarai semak dokumentasi FATCA)                                                                                                                                                                                                                                                                                                                                                                      |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1                                                    | Adakah pemegang akaun menyatakan tempat lahir di AS?                                                                                                |          | <ul style="list-style-type: none"> <li>Jika pemegang akaun disahkan Individu AS:               <ul style="list-style-type: none"> <li>- Borang W-9 <u>atau</u></li> </ul> </li> <li>Jika pemegang akaun bukan Individu AS:               <ul style="list-style-type: none"> <li>- Sijil Kehilangan Kewarganegaraan, dan _ dokumentasi yang sesuai<sup>N1</sup> <u>atau</u></li> <li>- Borang W-8BEN<sup>N3</sup></li> </ul> </li> </ul> |
| 2                                                    | Adakah pemegang akaun memberikan apa-apa petunjuk bahawa pemegang akaun adalah warganegara atau pemastautin AS?                                     |          | <ul style="list-style-type: none"> <li>Jika pemegang akaun disahkan Individu AS:               <ul style="list-style-type: none"> <li>- Borang W-9</li> </ul> </li> </ul>                                                                                                                                                                                                                                                               |
| 3                                                    | Adakah pemegang akaun menyatakan alamat di AS (termasuk Peti Surat)?                                                                                |          | <ul style="list-style-type: none"> <li>Jika pemegang akaun bukan Individu AS:               <ul style="list-style-type: none"> <li>- dokumentasi yang sesuai<sup>N1</sup> <u>atau</u></li> <li>- Borang W-8BEN<sup>N2</sup></li> </ul> </li> </ul>                                                                                                                                                                                      |
| 4                                                    | Adakah pemegang akaun <u>hanya</u> menyatakan nombor telefon AS?                                                                                    |          |                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 5                                                    | Adakah pemegang akaun menyatakan nombor telefon AS <u>dan</u> nombor telefon bukan di AS?                                                           |          |                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 6                                                    | Adakah pemegang akaun memberikan apa-apa arahan tetap untuk memindahkan dana kepada akaun yang ada di AS?                                           |          |                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 7                                                    | Adakah pemegang akaun memberikan Kuasa Wakil kepada seseorang yang mempunyai alamat di AS?                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 8                                                    | Adakah pemegang akaun memberikan hanya alamat “ <i>hold mail</i> ” atau “ <i>in care of</i> ” di AS, yang merupakan alamat tunggal untuk akaun ini? |          |                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Klasifikasi FATCA:</b>                            |                                                                                                                                                     |          |                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Bukan Individu AS                                    |                                                                                                                                                     |          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                |
| Individu AS                                          |                                                                                                                                                     |          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                |
| Pelanggan recalcitrant dengan <i>indicia</i> AS      |                                                                                                                                                     |          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                |
| Pelanggan recalcitrant tanpa <i>indicia</i> AS       |                                                                                                                                                     |          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                |
| Pelanggan AS yang tidak recalcitrant                 |                                                                                                                                                     |          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                |
| Pelanggan recalcitrant dengan akaun yang tidak aktif |                                                                                                                                                     |          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                |

|   | Status <i>Indicia</i> CRS                                                                                                                                                              | Ya/Tidak | Tindakan diperlukan jika “Ya”<br>(senarai semak dokumen CRS)                        |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------|
| 1 | Adakah pemegang akaun memberikan apa-apa petunjuk bahawa pemegang akaun adalah dari Negara Pemastautin Cukai yang lain?                                                                |          | Dokumentasi membuktikan (Pemegang Akaun) adalah Negara Pemastautin Cukai lain-lain. |
| 2 | Adakah pemegang akaun menyatakan sebarang alamat Negara Pemastautin Cukai lain-lain (termasuk Peti Surat)?                                                                             |          |                                                                                     |
| 3 | Adakah pemegang akaun memberikan <u>satu atau lebih</u> nombor telefon dalam Negara Pemastautin Cukai lain-lain?                                                                       |          |                                                                                     |
| 4 | Adakah pemegang akaun memberikan apa-apa arahan tetap untuk memindahkan dana kepada akaun di dalam Negara Pemastautin Cukai lain-lain?                                                 |          |                                                                                     |
| 5 | Adakah pemegang akaun memberikan Kuasa Wakil kepada seseorang yang mempunyai alamat dalam Negara Pemastautin Cukai yang lain?                                                          |          |                                                                                     |
| 6 | Adakah pemegang akaun memberikan hanya alamat “ <i>hold mail</i> ” atau “ <i>in care of</i> ” dalam Negara Pemastautin Cukai lain-lain, yang merupakan alamat tunggal untuk akaun ini? |          |                                                                                     |

**Nota:**

<sup>N1</sup> Pelanggan boleh juga memberikan dokumen alternatif, seperti dokumen yang boleh membuktikan kewarganegaraan di sesebuah negara selain Amerika Syarikat, dan penjelasan bertulis yang munasabah mengenai penolakan pemegang akaun kewarganegaraan AS ketika lahir, untuk membuktikan status pemegang akaun sebagai individu asing (iaitu selain daripada AS) seperti:

- Sijil pemastautin
- Identifikasi kerajaan yang berkaitan dengan individu (cth. Kad Pengenalan)
- Pengenalan diri sah yang dikeluarkan oleh sebuah badan kerajaan yang diberi kuasa (cth. kerajaan atau agensi kerajaan, atau majlis perbandaran) yang biasanya digunakan untuk tujuan pengenalan.

<sup>N2</sup> Jika tiada apa-apa dokumentasi yang membuktikan pemegang akaun bukan individual AS, Pengurus Perhubungan perlu mendapatkan borang W-8BEN

<sup>N3</sup> Negara Pemastautin Cukai: Negara selain daripada Malaysia dan AS.

| Deklarasi dan Pengakuan                                                                                                                                                   |        |                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------------------|
| Saya mengaku bahawa semakan akaun pembukaan yang telah dijalankan untuk pelanggan yang disenaraikan di atas; dan maklumat yang diberikan adalah benar, betul dan terkini. |        |                     |
| Nama pegawai/ Nombor PF                                                                                                                                                   | Tarikh | Tandatangan Pegawai |
|                                                                                                                                                                           |        |                     |