

► CREDIT CARD PAYMENT (PLEASE TICK (✓) WHERE APPLICABLE)

The Minimum Payment Due

The New Balance (Full Payment Due)

Effective Date

D	D	/	M	M	/	Y	Y	Y	Y
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MasterCard/Visa Account Number 1

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Cardholder Name 1

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MasterCard/Visa Account Number 2

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Cardholder Name 2

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MasterCard/Visa Account Number 3

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Cardholder Name 3

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► DECLARATIONS

I/We agree that the Bank accepts this order upon conditions on the reverse and agree to comply with and be bound by the provisions of the said terms and conditions and any amendments to the same which the Bank may subsequently introduce.

Signature of Account Holder

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Name

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Date

D	D	/	M	M	/	Y	Y	Y	Y
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► TERMS AND CONDITIONS

- 1) I/We undertake to ensure that sufficient funds are kept in my/our account to meet this payment.
- 2) Although the Bank will endeavor to effect such periodical payments, it accepts no responsibility to make the same and accordingly, the Bank shall not incur any liability through any error, refusal or omission to make all or any of the payment or by reason of late payment or by any omission to follow such instruction.
- 3) The Bank shall be at liberty, on behalf of the customer, to make use of any correspondent, agent or sub-agent or other agency in issuing its Demand Draft, Banker's Cheque or effecting its Telegraphic Transfer pertaining to this form and shall not assume any liability or responsibility for any delay, non-remittance or non-receipt of the proceeds arising on the part of the Bank's remittance or agents, sub-agents or other agencies which are outside the control of the Bank.
- 4) This order is subject to any arrangement now subsisting or which may hereafter subsist between myself/ourselves and the Bank in relation to my/our account or any banking accommodation afforded to me/us.
- 5) The Bank may, in its absolute discretion, conclusively determine the order of priority of payment by it of any money's pursuant to this or any order or cheque which I/we have heretofore or may hereafter give to the Bank or drawn on my/our account.
- 6) Any alterations and/or cancellations should be notified to the Bank in writing two weeks before the payment date.
- 7) The Bank may, at its absolute discretion, terminate this order as to future payments at any time by notice in writing to me/us or without notice at any time after being advised by the above named payee that no further payment is required, or without assigning any reason therefore.
- 8) This order will remain effective for the protection of the Bank in respect of payments made in good faith notwithstanding my/our death or bankruptcy or the revocation of this order by any other means until notice of my/our death or bankruptcy or of such revocation is received by the Bank.
- 9) A service charge or any subsequent rate of charges that may be made from time to time will be levied for each periodical payment effected by the Bank. This charge does not include in incidental postage and/or stamp duty and inland exchange which may also be applicable.
- 10) The Bank may levy a charge on all standing instructions on due dates, which may not be refunded even if the instruction is not effected for insufficient funds.
- 11) In the event that payment cannot be made due to insufficient funds in the account, the Bank shall not effect payment for the payment date concerned. Further payments shall only be made on the next subsequent payment date. The customer is required to make alternative arrangement to effect the payment concerned.
- 12) In consideration of your accepting this order, I/we undertake to indemnify you against all or any claims, demands, losses, damages, costs, charges and/or expenses which you may incur or sustain by reason of your carrying out of the above instruction by me/us.
- 13) Loan/Financing payments are accepted without prejudice to any recovery action, pending or contemplated for the full outstanding amount(s).

► FOR BANK'S USE ONLY

Processing Department (Please tick (✓) where applicable):

<input type="checkbox"/> Branches	<input type="checkbox"/> Wealth Management Operations	<input type="checkbox"/> Automotive Financial Services	<input type="checkbox"/> Card Centre
<input type="checkbox"/> Mortgage Financing	<input type="checkbox"/> Others, please specify _____		

Date Received

D	D	/	M	M	/	Y	Y	Y	Y
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Signature

Verified by

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Please fill in only if applicable.

PPI No.		Periodicity	
Institution Code		Payment Type	
Currency Code		Ref. Type	
Bank Code		Charges (Y/N)	
Branch Code		Commission (Y/N)	