Email:

SUKUK PRIHATIN - CHANGE REQUEST FORM



| | | | W | |
|---|-----------------------------------|---|----------|-------|
| Kindly complete & email this change request form to: | | | | |
| Helpdesk: [Distribution Bank to insert number] Email: [Distribution Bank to insert email address] | | | | |
| Date of Request: | | Channel: | | |
| Distribution Bank: | | | | |
| | | | | |
| Details of Investor | | | | |
| Serial No: | | nvestor's Name: | | |
| (per Statement) Email Address | | per NRIC) | | |
| registered | | NRIC: | | |
| Registered Contact Number | | Business Registration No: if applicable) | | |
| Account Number | | | | |
| | | | | |
| Details of Principal Amount Waived Change Request | | | | |
| Amount Invested/Principal Amount Waived during application: | | | RM | (A) |
| New Principal Amount Waived | | | RM | (B) |
| Final Principal to be credited to Account | | | RM | (A-B) |
| For Distribution Bank use only | | | | |
| | , | | | |
| Bank | | | | |
| Verification by | | Date | | |
| Name | | Department | | |
| Contact Number | | Email | | |
| Declaration by Distri | ibution Bank | | | |
| We confirm we have performed the necessary verification on the customer/investor. | | | | |
| | all information provided above ar | | - | |
| For Maybank use or | nly | | | |
| Signature Verified by | <i>y</i> : | Request Authorized by: | | |
| Name of Officer: | | Name of Officer: | | |
| Date: | | Date: | | |
| Contact Number: | | Contact Number: | | |

Email: