

To register for AutoPay, please complete this form and email to payment@ytlbroadband.my

PERSONAL PARTICULARS

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|--|--|--|--|--|------------|--|--|--|--|--|--|--|--|--|--|--|
| Name (as per I.C.) | | | | | | | | | | | | | | | | | | | | | | | | |
| I.C. No./Passport No. | | | | | | | | | | | | | | | | | | | | | | | | |
| Office No. | | | | | | | | | | | | | Mobile No. | | | | | | | | | | | |

ACCOUNT DETAILS

| | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Account No. | | | | | | | | | | | | | | | | | | | | | | | | |
| Account Name | | | | | | | | | | | | | | | | | | | | | | | | |

CREDIT/DEBIT CARD DETAILS

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------------------|--------------------------|--------------------------|--------------------------|---------------------------------|--------------------------|--------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Name on Card | | | | | | | | | | | | | | | | | | | | | | | | |
| Issuer Bank | | | | | | | | | | | | | | | | | | | | | | | | |
| Card No. | | | | | | | | | | | | | | | | | | | | | | | | |
| Card Expiry Date | | | / | | | (MM/YY) | | | | | | | | | | | | | | | | | | |
| Card Type please tick () | <input type="checkbox"/> | Visa (Credit/Debit Card) | <input type="checkbox"/> | Master Card (Credit/Debit Card) | <input type="checkbox"/> | American Express (Credit Card) | | | | | | | | | | | | | | | | | | |

DECLARATION AND SIGNATURE

I hereby confirm the above details are correct and authorize YTL Broadband Sdn Bhd to charge my card for the purpose of settling the outstanding balance relating to the Account No. as stated above.

_____ Date : _____
Cardholder Signature (as appears on credit/debit card)

FOR YTL BROADBAND OFFICE USE ONLY

| | | | |
|----------------------------------|--|------|--|
| Received by | | Date | |
| Accounts Dept. (input to CMS) | | Date | |
| Checked by | | Date | |
| Notified customer | | Date | |