

**Balance Transfer Form / Borang Pemindahan Baki**

**Fax / Faks : 03-7953 8640**

**Step 1 / Langkah 1:**

Attach a photocopy of your latest other bank credit card account statement(s) you wish to transfer from / Lampirkan salinan penyata akaun terkini kad kredit bank lain yang anda ingin pindahkan.

**Step 2 / Langkah 2:**

Complete the application form / Lengkapkan borang ini

My personal details / Butir-butir peribadi saya

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

NRIC No. / No. KP : new / baru \_\_\_\_\_

E-mail / E-mel : \_\_\_\_\_

Tel: (H/P) \_\_\_\_\_ (H/O) \_\_\_\_\_

**Step 3 / Langkah 3:**

Choose (✓) your Plan / Pilih (✓) Pelan yang anda kehendaki

External Transfer (From other bank to Maybankard) / Pindahan Luaran (Dari bank lain ke Maybankard)

Amount to be settled (RM) / Jumlah yang perlu dijelaskan (RM)

<b>0.5%</b> 6 mths	<b>0.75%</b> 9 mths	<b>0%</b> 12 mths	<b>0.375%</b> 24 mths	<b>0.413%</b> 36 mths
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Maybankard Credit Card No. / No. Kad Kredit Maybankard

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

Card Issuer / Pengeluar Kad \_\_\_\_\_

Card No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

RM \_\_\_\_\_

Card Issuer / Pengeluar Kad \_\_\_\_\_

Card No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

RM \_\_\_\_\_

Card Issuer / Pengeluar Kad \_\_\_\_\_

Card No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

RM \_\_\_\_\_

Total / Jumlah RM \_\_\_\_\_

Internal Transfer (From Maybankard to Maybankard) / Pindahan Dalaman (Dari Maybankard ke Maybankard)

<b>0.375%</b> 24 mths	<b>0.413%</b> 36 mths
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To / Ke  American Express  MasterCard  Visa

Card No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

From / Dari  American Express  MasterCard  Visa

Card No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

American Express  MasterCard  Visa

Card No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

RM \_\_\_\_\_

RM \_\_\_\_\_

Total / Jumlah RM \_\_\_\_\_

I agree that Maybank Islamic Berhad shall reserve the absolute right to approve or reject my request as you deem fit without assigning any reason. For the purpose herein I authorise Maybank Islamic Berhad to check and receive all information relating to my account with the card issuer(s) or any other banks or financial institutions.

Saya bersetuju bahawa pihak Maybank Islamic Berhad mempunyai hak mutlak untuk meluluskan atau menolak permintaan saya atas budi bicaranya tanpa memberikan sebarang sebab. Untuk tujuan perjanjian ini, saya memberikan kebenaran kepada Maybank Islamic Berhad untuk menyemak dan menerima semua maklumat berkaitan akaun saya dengan pengeluar (pengeluar-pengeluar) kad atau mana-mana bank atau institusi kewangan yang lain.

(X)

Principal Cardmember's Signature / Tandatangan Ahli Kad Utama  
Date / Tarikh: \_\_\_\_\_

Please seal this form with required documents / Sila sertakan dokumen yang diperlukan dalam borang ini

**For Bank Use / Untuk Kegunaan Bank**

Name / Nama FE/CSE/RB/DSE/TSE: \_\_\_\_\_

PF No. / No. PF: \_\_\_\_\_  
Branch / Cawangan: \_\_\_\_\_

Tel. No. / No. Tel.: ( ) - \_\_\_\_\_

Branch Code / Kod Cawangan: \_\_\_\_\_  
Introduced by / Diperkenalkan oleh (Lead Generator): \_\_\_\_\_

Fax No. / No. Faks.: ( ) - \_\_\_\_\_

PF No. / No. PF: \_\_\_\_\_  
Branch / Cawangan: \_\_\_\_\_

Tel. No. / No. Tel.: ( ) - \_\_\_\_\_

Branch Code / Kod Cawangan: \_\_\_\_\_

Fax No. / No. Faks.: ( ) - \_\_\_\_\_