

REQUEST FOR ADDITIONAL POS TERMINAL
A) Additional Terminal Request

| | | |
|-------------------------------------|--|--|
| <input type="checkbox"/> New Outlet | <input type="checkbox"/> Existing Outlet | <input type="checkbox"/> Ad-Hoc : Duration From : _____ to _____ |
| <input type="checkbox"/> Fixed Line | <input type="checkbox"/> GPRS | <input type="checkbox"/> MPOS <input type="checkbox"/> All-In-One (E-wallet T&C Apply) |

B) Terminal Conversion - Kindly state the MID/TID in Company Details

| | | |
|---|---|---|
| <input type="checkbox"/> Fixed Line to GPRS | <input type="checkbox"/> Fixed Line to MPOS | <input type="checkbox"/> GPRS to Fixed Line |
| <input type="checkbox"/> GPRS to MPOS | <input type="checkbox"/> MPOS to Fixed Line | <input type="checkbox"/> MPOS to GPRS |

C) Company Details

| | | | |
|--------------------------------|--|-----|--|
| Company registered name | | | |
| Existing Merchant Number (MID) | | TID | |

D) Merchant Outlet(s) Details

| | | | |
|-------------------------------|--|---|--|
| (1) Merchant trading name | | | |
| Address (New Outlet/Existing) | | | |
| Contact person | | Mobile No. (compulsory): Telephone No: | |
| (2) Merchant trading name | | | |
| Address (New Outlet/Existing) | | | |
| Contact person | | Mobile No. (compulsory): Telephone No: | |

E) Fees and Charges

| | | | |
|------------------|----|---------------|----|
| Terminal Deposit | RM | Admin Fee | RM |
| Monthly Rental | RM | Ad-Hoc Rental | RM |

F) Payment Acceptance Facility

| | | | | | |
|---|---------------------------------|-------------------------------|----------------------------------|------------------------------|---------------|
| Do you previously accepted card and/or E-wallet payment (if Yes, please fill below) : | | | | | |
| <input type="checkbox"/> Alliance Bank | <input type="checkbox"/> AmBank | <input type="checkbox"/> CIMB | <input type="checkbox"/> Maybank | <input type="checkbox"/> RHB | Others: _____ |
| Duration From: Start Date : _____ to Ceased Date: _____ | | | | | |
| Do you curenly accept card and/or E-wallet payment (except Hong Leong Bank): | | | | | |
| <input type="checkbox"/> Alliance Bank | <input type="checkbox"/> AmBank | <input type="checkbox"/> CIMB | <input type="checkbox"/> Maybank | <input type="checkbox"/> RHB | Others: _____ |

I/We hereby declare that the above details are true and correct and I/We agree not to hold HLB responsible or liable for any loss and/or damage or indirectly from this request.

Merchant's Authorized Signatory

Name :

Designation :

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