

Premium IDD/STD – PREPAID PACKAGE APPLICATION FORM

Name (as in I/C) (Mr/ Ms/ Dr/ Mdm) : _____
(If under personal)

Company Name : _____
(If under company)

New I/C No. : _____ Mother’s Maiden Name : _____
(For security purpose)

Address: _____

Postcode: _____ E-mail address: _____

Handphone No: _____ Office Tel: _____

House Tel : _____ (Telekom registered name : _____)

Fax No : _____ Contact Person Name (for company registration) : _____

Please indicate the telephone numbers that you would like to use for the Premium IDD/STD Services:

1) _____ 2) _____ 3) _____

4) _____ 5) _____

Amount subscribed for _____ (minimum RM100.00 or multiple of RM100.00
(Amount Not Refundable))

Itemised Biling (RM1.00 per month): _____ Post _____

Pay by : Visa / Master / Amex / Cheque

Card or Cheque Issuing Bank : _____

Name as on Credit Card: _____

Credit Card / Amex / Cheque No: _____

Credit Card expiry date: _____ (Not < 6 months before expiry)

I wish to have Auto-Reload or SMS Reload of RM100.00 minimum whenever my account balance reaches RM40.00 and below. Please debit my credit card as given above. (please tick whichever applicable)

* MBB account holders can pay through Maybank2u.com, Phone Banking or ATM Machine

Signature: _____ Date: _____

Sales Person : _____ Code: _____

Please fax to 03-2162 0628

Note:

- 1. Please write in CAPITAL letters and tick the relevant box.
- 2. Photocopy NRIC and Credit Card (for credit card user)