AN INVITATION RESERVED ONLY FOR FPAM MEMBERS

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The Way Banking Should Be
A division of CIMB Bank Berhad

Financial Planning Association Of Malaysia

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03-6204 7979

FPAM	8	9	4	2

I HEREBY APPLY FOR THE DIRECT ACCESS FPAM CREDIT CARD (PLEASE ✔) :

- ☐ WORLD MasterCard
- ☐ Platinum MasterCard (Co-Brand)
- ☐ VISA Infinite
- ☐ VISA Platinum

Note : Additional credit cards will share a combined credit line.

A clean Overdraft Facility of RM10,000 will be granted to eligible card member with minimum income of RM60,000 p.a. Kindly furnish 3 months latest salary slips / EA Forms / Income Tax Receipt.

***Documents required, non-returnable :**
✓ A photocopy of I/C (both sides, enlarge) ✓ Business Card ✓ Income Documents

REQUIREMENTS		
Income	WORLD MasterCard / VISA Infinite	: RM200,000 per annum
	Platinum MasterCard (Co-Brand) / VISA Platinum	: RM 24,000 per annum
Minimum Age	Principal	: 21 years old

MY PERSONAL DETAILS

☐ Mr ☐ Miss ☐ Madam ☐ Dr ☐ Others

Full Name as in NRIC :

New I/C No. : - -

Old I/C No. :

Nationality : M A L A Y S I A N

Name to appear on Card (Not more than 11 letters) :

Membership No. (8 digits) :

Race : ☐ Malay ☐ Chinese ☐ Indian ☐ Others

Marital Status : ☐ Single ☐ Married ☐ Widowed ☐ Divorced

Sex : ☐ Male ☐ Female

MY PROFESSIONAL QUALIFICATIONS

☑ Yes, I am a member of Financial Planning Association Of Malaysia

MY HOME ADDRESS

Residential Address :

Postcode :

Residence is : ☐ Owned - No loan ☐ Owned - With loan ☐ Rented ☐ Employer's ☐ Parents / Relatives Years there :

Home Tel : -

Mobile Tel : -

E-Mail :

MY EMPLOYMENT DETAILS

Name of Company :

Address :

Postcode :

Position :

Office Tel : -

☐ Salaried employee ☐ Self-employed Years there :

Gross Annual Salary : R M

Other income per annum : R M

MY PERSONAL SECURITY CODE

Mother's Maiden Name :

MY BILLING AND CARD DELIVERY INSTRUCTIONS

Please Send My Statement To : ☐ Home ☐ Office

Please Courier My Card To : ☐ Home ☐ Office

OVERDRAFT FACILITY (PLEASE ✔)

☐ Please tick here, if NOT interested in Overdraft Facility.

OTHER BANKING SERVICE

Yes, I would like to apply for the following services :

☐ Credit Card PIN (to access ATM and CIMB Clicks online statement)

MY EMERGENCY CONTACT PERSON (RELATIVE/FRIEND NOT STAYING WITH ME)

Name :

Relationship :

Home Tel : -

Mobile Tel : -

Office Tel : -

DECLARATION (BY INDIVIDUAL BORROWERS) IN CONNECTION WITH BANK NEGARA GUIDELINES ON CREDIT TRANSACTIONS AND EXPOSURES WITH CONNECTED PARTIES

Please complete this declaration section if any of the below is applicable to you.
(No declaration from you denotes that it is not applicable).

1. ☐ I am a staff of the CIMB Group[1].
2. ☐ To the best of my knowledge, I have close relative(s)[2] employed under the CIMB Group or has acted as my guarantor.

Particulars of my close relative(s) in CIMB Group :

Name	I/C No.	Relationship	Acted As Guarantor (Indicate Yes or No)

[1] CIMB Group means CIMB Bank Berhad or CIMB Islamic Bank Berhad or CIMB Investment Bank Berhad or other subsidiaries or companies controlled by the aforesaid respective banking institutions.

[2] Close relative(s) include parents / spouse of staff including the spouse's dependents children / spouse of the children / brother and sister / spouse of brother / sister and any other dependents and persons who may influence / be influenced by the staff.

'DECLARATION' SECTION

I hereby declare and certify that all the information given by me in this application is true, accurate and complete. Notwithstanding the generality of the foregoing, I confirm that the Bank is authorised to verify and or make any checks and/or obtain any information and/or confirmation, with or from any credit reference agencies, and/or from any financial institution, on me and/or any other person, individual and/or entity as the Bank may deem fit, for any purposes which the Bank deems fit.

I hereby request CIMB Bank to issue, upon approval of this application, the credit card(s) which I have indicated. I acknowledge that the use of the credit card(s) issued to me shall be subject to CIMB Bank's Cardmember agreement ("Cardmember Agreement"), which will be sent to me with the credit card(s) upon the approval of this application, and agree to be bound by the terms and conditions set forth in the Cardmember Agreement upon issuance or use of the credit card(s).

I acknowledge that CIMB Bank reserves the sole and absolute right to decline or reject my application without assigning any reasons therefore.

I also acknowledge that it is a requirement by Bank Negara Malaysia ("BNM") that all information relating to this application, whether successful or otherwise, must be updated and/or transmitted to the Central Credit Information System ("CCRIS"), a database maintained by BNM. In addition thereto, CIMB Bank is hereby irrevocably and unconditionally authorised to disclose any information or particulars given by me herein to any person(s) in or out of Malaysia and for such purpose(s) as CIMB Bank deems fit, proper or necessary at any time. I understand that the credit card(s) when issued shall at all times remain the property of CIMB Bank and must be duly returned upon request by CIMB Bank.

I further agree liability to accept liability for all amount incurred arising from the use of my credit card(s) issued pursuant to this application or at any time thereafter at my request.

Principal Applicant's Signature :
Date :

Please fax or scan the completed application form (together with your I/C (front & back), business card and degree certificate*) to the following:

Fax: 03-2381 5533 or E-mail: mktgda@cimb.com

*All documents submitted are non-returnable