

Debit Card/Debit Card-i Transaction Alert Service Maintenance Form

Please complete this form and submit to the nearest branch.

Fax: 03-7946 8888 | Email: HLOnline@hbb.hongleong.com.my | Hong Leong Bank / Hong Leong Islamic Branch

PERSONAL PARTICULARS

Name (Full name as in NRIC / Passport) *:

NRIC/ Passport No *:

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Contact Details:

_____ (Mobile *) _____ (Home) _____ (Office)

_____ (Email Address *)

* Mandatory field

YES, I WANT TO REQUEST THE FOLLOWING SERVICE (please tick where applicable):

Change of Point Of Sale Transaction Alert Threshold Amount

Send me Alerts for Amounts Over: (Please tick one only)

RM 500 RM 1,000 RM 1,500 RM 2,000 Others : RM _____

- ♦ I understand that incomplete forms will not be processed and that Hong Leong Bank / Hong Leong Islamic Bank will continue to apply its pre- determined thresholds amount with regards to SMS or Email Transaction Alerts.

Change of SMS or Email Contactless Transaction Alert Threshold Amount Send

me Alerts for Amounts Over:

(Please tick one only)

RM 50 RM 200 Others : RM _____

- ♦ I understand that incomplete forms will not be processed and that Hong Leong Bank / Hong Leong Islamic Bank will continue to apply its pre- determined thresholds amount with regards to SMS or Email Transaction Alerts.

Opt-out of Transaction Alerts

I do not wish to receive any notification from the SMS or Email Transaction Alert Service

- ♦ I understand that my decision to opt-out from receiving Transaction Alerts may increase the risk of unauthorised or fraudulent charges transacted on my card(s).

Change of Transaction Alert method:

SMS to Email Email to SMS

- ♦ I understand that I must register a valid email address with Hong Leong Bank / Hong Leong Islamic Bank to receive transaction alerts via email.

TERMS AND CONDITIONS (Important: Please read before you sign):

- ♦ Hong Leong Bank / Hong Leong Islamic Bank will notify the Principal cardholder via SMS or Email of every transaction they make for their debit card/debit card-i which exceeds the amount pre-determined by the Bank or indicated by the Principal cardholder in this Form.
- ♦ The Principal cardholder hereby acknowledges and agrees that the sending of SMS or Email Transaction Alert by The Bank's or its receipt by the Principal cardholder may be delayed or prevented by factors beyond the Bank's control.
- ♦ The Principal cardholder is allowed to opt-out from receiving SMS or Email Transaction Alert by indicating in this form or notifying the Bank in writing.
- ♦ Receipt of transaction alerts via SMS is subject to Principal cardholder's mobile phone operator being able to support this service, and the service provider's term and conditions.
- ♦ Receipt of transaction alerts via Email is subject to Principal cardholder's email service provider being able to support this service, and the service provider's term and conditions.
- ♦ It is the Principal cardholder's responsibility to ensure that his/ her mobile phone is able to receive SMS or Email Transaction Alert in Malaysia or overseas.
- ♦ The provision of SMS or Email Transaction Alert does not enable a cardholder to disclaim his/ her obligations related to the lost/ stolen card as stated in the terms and conditions governing the debit card/debit card-i.
- ♦ The latest mobile phone number and email address of the Principal cardholder on record with the Bank will be used for the purpose of sending the SMS or Email Transaction Alert stated herein. The Principal cardholders shall immediately notify the Bank of any change on his/ her mobile phone numbers or email address.

DECLARATION:

- ♦ I declare that the information provided by me in this form is true, accurate and complete.
- ♦ I understand that the above amendment will be applicable to all debit card/debit card-i under my profile in the Bank and can only be effective upon the Bank receiving the completed and signed copy request form.
- ♦ I hereby authorise the Bank to update my records accordingly in the event my contact details stated herein differ from the record with the Bank.

Cardholder's Signature

Date: _____

FOR BANK USE ONLY:

Signature/ Biometric Verified & Attended By:

Name :
Department :
Date :