

## PAYOR DECLARATION

Please complete all information requested on this form if the "Payor" is not the "Participant". (i.e. contribution payment made by third party)

Payor Details (Account/Card Holder)/Nama Pembayar (Pemegang Akaun/Kad)			
Full Name as shown in NRIC/Passport			
NRIC number/No. Other Identification No.			
Date of Birth		Nationality	
Residential Address			
Mailing Address	<i>Please provide if the Mailing Address is not same as Residential Address</i>		
Contact No. (Mobile/Office/Residential)			
Occupation		Employer Name	
Relationship with Participant	<input type="checkbox"/> Children <input type="checkbox"/> Spouse	<input type="checkbox"/> Parent/Legal Guardian <input type="checkbox"/> Employer	<input type="checkbox"/> Other <i>(Please state _____)</i>

### Important Note/Nota Penting:

Credit or Debit Card payment is not applicable for Single Contribution Plan.

Pembayaran secara Kad Kredit atau Debit tidak terpakai untuk Pelan caruman tunggal.

- I hereby authorise FWD Takaful Berhad ("Takaful Operator") to/Saya dengan ini membenarkan FWD Takaful Berhad ("Pengendali Takaful") untuk:-
  - debit my credit card, including any new, updated and/or replacement credit card; with the amounts payable to the Takaful Operator from time to time for the Takaful Certificate to be issued under this proposal/debit kad kredit saya, termasuk sebarang kad kredit baharu, kemaskini dan/atau ganti; dengan jumlah yang perlu dibayar kepada Pengendali Takaful dari semasa ke semasa untuk Sijil Takaful yang akan dikeluarkan berdasarkan cadangan ini.
- I also hereby agree to the following terms and conditions/Saya dengan ini bersetuju dengan terma-terma dan syarat-syarat berikut:-
  - I hereby consent and authorise the Issuing Bank to disclose to the Takaful Operator my new, updated and/or replacement credit card for my continuous participation in this Takaful plan;/Saya dengan ini memberi izin dan membenarkan Bank Pengeluar untuk mendedahkan kad kredit baharu, kemaskini dan/atau ganti saya kepada Pengendali Takaful untuk penyertaan berterusan saya dalam Pelan Takaful ini;
  - This authorisation shall remain in force until the Takaful Operator receives a written notification from me for any change of information to my payment instruction or to cancel this authorisation; and/Pemberian kuasa ini akan kekal berkuatkuasa sehingga Pengendali Takaful menerima notis bertulis bagi sebarang perubahan maklumat berkenaan dengan arahan pembayaran saya atau membatalkan pemberian kuasa tersebut; dan
  - The Takaful Operator shall not be held responsible or liable for any claims, loss, damage, costs and expenses arising from the successful processing of the debit or the unsuccessful processing of the debit due to exceeding credit limit, malfunction of system, electricity failure and any other factors beyond the control of Takaful Operator./Pengendali Takaful tidak akan bertanggungjawab ke atas apa-apa tuntutan, kerugian, kerosakan, kos dan perbelanjaan yang timbul akibat proses pendebitan yang berjaya atau proses pendebitan yang tidak berjaya akibat melebihi had kredit, sistem tidak berfungsi, kegagalan elektrik atau lain-lain faktor di luar kawalan Pengendali Takaful.

\_\_\_\_\_  
 Signature of Account/Card Holder:  
 Tandatangan Pemegang Akaun/Kad  
 Date/Tarikh:

\_\_\_\_\_  
 Signature of Applicant  
 Tandatangan Pemohon  
 Date/Tarikh:

\_\_\_\_\_  
 Signature of Agent  
 Tandatangan Pemegang Agent  
 Date/Tarikh: