APPLICATION FORM FOR CREDIT/FACILITY LIMIT INCREASE/CARD UPGRADE/SUPPLEMENTARY CREDIT/FACILITY LIMIT INCREASE

BORANG PERMOHONAN PENINGKATAN HAD KREDIT/KEMUDAHAN/MENAIK TARAF KAD/PENINGKATAN HAD KREDIT/KEMUDAHAN KAD TAMBAHAN

1 : Please fill your details in CAPITAL LETTER and tick ☑ where applicable. / *Sila lengkapkan maklumat anda dengan HURUF BESAR dan tandakan ☑ pada petak yang berkenaan.*
2 : Send the completed form to **cardservices@bsn.com.my** together with income documents, where applicable / *Hantar borang yang lengkap kepada* ***cardservices@bsn.com.my*** *bersama dengan dokumen pendapatan, di mana berkenaan.*

A. CARDMEMBER INFORMATION / *MAKLUMAT AHLI KAD*

Full Name/ *Nama Penuh* :_____ IC No. / *No.KP* | | | | | | | | | | | | |

Last four digits of BSN Credit Card No. / *Empat digit terakhir No. Kad Kredit BSN* | | | |

Email/*E-mel* : _____ Handphone No./ *No. Tel Bimbit* : _____

B. TYPE OF REQUEST / *JENIS PERMINTAAN*

i. Increase Credit / Facility Limit / *Peningkatan Had Kredit / Kemudahan*

☐ I would like a credit/facility limit increase of my BSN Credit Card / *Saya ingin meningkatkan had kredit / kemudahan Kad Kredit BSN saya :*

From/*Dari:* **RM** | | | | | | | | To/*Kepada :* **RM** | | | | | | | |

ii. Card Upgrade / *Menaik Taraf Kad*

☐ I would like to upgrade my BSN Credit Card to / *Saya ingin menaik taraf Kad Kredit BSN ke:*

☐ Gold / *Emas* ☐ Platinum / *Platinum*

iii. Card Conversion / *Pertukaran Kad*

☐ I would like to convert my existing BSN Credit Card to / *Saya ingin menukar Kad Kredit BSN sedia ada saya kepada:*

_____

iv. Revise Credit / Facility Limit For Supplementary Cardmember / *Menyemak Semula Had Kredit / Kemudahan Ahli Kad Tambahan*

☐ I would like to revise the credit /facility limit that was set for my Supplementary Cardmember /
Saya ingin menyemak semula had kredit/kemudahan yang telah ditetapkan bagi Ahli Kad Tambahan saya : From/*Dari:* **RM** | | | | | | | | To/*Kepada :* **RM** | | | | | | | |

Name / *Nama* _____

☐ My Supplementary Cardmember will share my credit /facility limit / *Ahli Kad Tambahan akan berkongsi had kredit /kemudahan saya.*

☐ I would like to assign RM_____ of my credit /facility limit to my Supplementary Cardmember / *Saya ingin menetapkan RM_____ daripada had kredit / kemudahan saya kepada Ahli Kad Tambahan saya.*

v. Update Income Information / Kemaskini Maklumat Pendapatan

Current Employer / *Majikan sekarang:* _____

Current Occupation / *Pekerjaan sekarang:* _____

Annual income / *Pendapatan tahunan RM:* | | | | | | | | |

For request (i) and (ii), please complete item (iv) and attach income documents indicated below / *Untuk permohonan (i) dan (ii), sila lengkapkan perkara (iv) dan sertakan dokumen pendapatan yang berikut :*

Note/*Nota*:

a. Salaried Earners / *Pekerja Bergaji*

- Latest 1 Month's pay slip OR
  Penyata gaji sebulan terkini ATAU
- Latest EA Form OR
  Borang EA terkini ATAU
- Latest BE Form with LHDN receipt or proof of tax paid OR
  Borang BE terkini dengan resit LHDN atau bukti pembayaran cukai ATAU
- Latest EPF Statement
  Penyata KWSP terkini

b. Self-Employed / *Bekerja Sendiri*

- Latest B Form with LHDN receipt or proof of tax paid.
  Borang B terkini dengan resit LHDN atau bukti pembayaran cukai.

c. Commission Earners /*Pekerja Berpendapatan Komisyen*

- CP58 Form / *Borang CP58*
  OR / *ATAU*
- Latest 6 months' comission statement /
  Penyata komisyen 6 bulan terkini

I hereby confirm and declare that all information given by me is true and complete. / *Saya dengan ini mengesahkan dan mengaku bahawa segala maklumat yang saya berikan adalah benar dan lengkap.*

_____ _____

Signature of Principal Cardholder / *Tandatangan Pemegang Ahli Kad Utama* Date / *Tarikh*

C. FOR BANK USE ONLY | *UNTUK KEGUNAAN BANK SAHAJA*

Input by _____ Signature _____ Date _____

Approved by _____ Signature _____ Date _____

Bank Simpanan Nasional, Jabatan Peruncitan Produk
Tingkat Bawah, Blok A,117 Jalan Ampang,
50450 Kuala Lumpur

Email to / *E-mel kepada*
cardservices@bsn.com.my