

FINANCIAL RELIEF FACILITY REQUEST FORM



APPLICANT INFORMATION

Full Name (as per NRIC/PP):

Current address:

NRIC/Passport no.

Tel No:

Email Address:

RELIEF REQUEST(S)

Facility (X to select):

Nature of Business:

Facility (X to select):	Account 1:	Account 2:
Micro Finance	Account 1:	Account 2:
Housing Loan/Financing	Account 1:	Account 2:
Personal Loan/Financing	Account 1:	Account 2:
ASB Loan/Financing	Account 1:	Account 2:
Hire Purchase	Account 1:	Account 2:
Credit Cards	Account 1:	Account 2:

REASON FOR RELIEF PROGRAM

REQUESTED BY

I acknowledged the above details are accurate and in order.

(Customer's signature)

Date

For Bank's Use Only

Net Balance RM:

Month In Arrears (MIA):

Recommended Period:

RECEIVED BY:

VERIFIED BY:

AUTHORIZED BY:

Name:
Section:
Date:

Name:
Section:
Date:

Name:
Section:
Date:

The request submitted is subject to Bank's approval. Required Documents:

For Individual:

- Latest Salary Slip / latest Income Tax Statement *or*
- Employer's confirmation letter where applicable (unpaid leave / salary reduction / termination) *or*
- Confirmation Letter from Government hospital that they are infected or undergoing treatment for COVID-19

For Company:

- Cash Flow Statement/ Latest 3 months Bank Statement / Latest Income Tax Statement *or*
- Letter from suppliers on interruption of delivery / business supply *or*
- Notice of Business Closure by customer/ business partners

How to apply:

Fill up the form, furnish relevant documents and e-mail to customersupport_crd@bsn.com.my or fax to 03-21634796