**Change of Principal Amount Waived**

|  |  |  |
| --- | --- | --- |
| **SUKUK PRIHATIN - CHANGE REQUEST FORM** | **Picture 8** | |
| **Kindly complete & email this change request form to:** | |

Helpdesk: [Distribution Bank to insert number] Email: [Distribution Bank to insert email address]

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Request: |  | Channel: |  |
| Distribution Bank: |  | | |

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| --- |
| **Details of Investor** |

|  |  |  |  |
| --- | --- | --- | --- |
| Reference No:  *(per Statement)* |  | Investor’s Name:  (per NRIC) |  |
| Email Address registered |  | NRIC: |  |
| Registered Contact Number |  | Business Registration No:  *(if applicable)* |  |
| Account Number |  | | |

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| **Details of Donation Change Request** |

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| --- | --- |
| Amount Invested/Principal Amount Waived during application: | RM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(A) |
| New Principal Amount Waived | RM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(B) |
| Final Principal to be credited to Account | RM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(A-B) |

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| --- |
| **For Distribution Bank use only** |

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| --- | --- | --- | --- |
| Bank |  | | |
| Verification by |  | Date |  |
| Name |  | Department |  |
| Contact Number |  | Email |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Declaration by Distribution Bank** | | | |
| 1. We confirm we have performed the necessary verification on the customer/investor. |  |
| 1. We confirm all information provided above are correct and in order. |  |
| **For Maybank use only** | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature Verified by: |  | Request Authorized by: |  |
| Name of Officer: |  | Name of Officer: |  |
| Date: |  | Date: |  |
| Contact Number: |  | Contact Number: |  |
| Email: |  | Email: |  |