

REFLEX Service Request Maintenance Form

Corporate Maintenance

Complete all relevant sections and submit the Service Request Maintenance Form along with required supporting document(s) (where applicable) to the account holding RHB Bank Branch.

A. Corporate Details

Corporate Name

Corporate ID Corporate Primary Account No.

B. Request Details (Please tick whichever applicable)

Update of Company Details

Corporate Name

Business / Correspondence Address

Postal Code City

State / Province Country

Office Tel. No. Fax No.

Note: For change of Corporate/Company Name, please ensure Form/Borang 13 from SSM is furnished along with this form

Update of Contact Person Details

Name*

Office Tel. No.* Mobile No.*

Designation*

Email

Change From Premium package to SME package (Please ensure SME Declaration form is furnished along with this form.)

Change Corporate Transaction Limit Limit: RM Note: The limit will be updated to all accounts tagged in Reflex

Reinstatement of FTT Module in Reflex

Note: Please attach together Reflex FEA Declaration Form, Letter of Revoking FTT Access and supporting documents

C. Declaration

I/We hereby confirm that I/we am/are authorized to act for and on behalf of the Company/Association/Club/Society/Partnership/ Agency/Entity.

I/We hereby confirm that all information provided herein and in any other form related to this application is true and accurate to the best of my/our knowledge as at the date of this application.

D. Authorised Signatory/ies

_____ Signatory 1	_____ Signatory 2	_____ Company Stamp
Name* <input type="text"/>	Name* <input type="text"/>	
Designation* <input type="text"/>	Designation* <input type="text"/>	
NRIC*/Passport* <input type="text"/>	NRIC*/Passport* <input type="text"/>	
Date* <input type="text"/>	Date* <input type="text"/>	

For BANK use only

Branch Code <input type="text"/>	Date <input type="text"/>
Processing Checklist: I hereby confirmed that: - Duly completed form, along with the necessary supporting documents. - Authorised signatory(ies) is/are as per account operating mandate (Reflex Primary Corporate Account)	Verified by, _____ Signature Name: Designation: