

DISCLOSURE OF CUSTOMER INFORMATION CONSENT FORM

Date:

To: Affin Bank Berhad, Affin Islamic Bank Berhad and/or Affin Hwang Investment Bank Berhad ("**Bank**")

Name of Requestor:

NRIC No./ Registration No.:

By signing this form, I/we:

Instruction: Please select only ONE option.		Please use (✓)
(a)	<p>as Customer</p> <p><i>[Note: Customer refers to any person who uses, has used or may be intending to use (i.e. potential customer) any financial services or products and includes: -</i></p> <p><i>1) a representative of the customer such as the parents of a minor and authorised representative (i.e. a person authorised by the customer to act on its behalf e.g. trustee, someone with power of attorney, legal guardian, insurance agent authorised by a customer); and</i></p> <p><i>2) a person who has entered or intend to enter into arrangement with the Bank (such as a guarantor or third party security provider) on account of or for the benefit of a customer.]</i></p>	
(b)	<p>as executor or administrator for the estate of the Customer</p> <p><i>[When selecting this option, please include Customer's name and NRIC number below].</i></p> <p>Customer's Name: _____</p> <p>NRIC No.: _____</p>	
(c)	<p>as legal personal representative for the Customer</p> <p><i>[When selecting this option, please include Customer's name and NRIC number below].</i></p> <p>Customer's Name: _____</p> <p>NRIC No.: _____</p>	

- 1) declare that I/we have read, understood and agreed to be subject to the AFFIN Group Privacy Notice which is available at www.affingroup.com or the Bank's branches;
- 2) expressly consent to and authorise the Bank to disclose the Customer Information to the parties specified, and for purposes below:

[Note: Customer Information refers to personal or corporate data, account and transaction details and relationship with the Bank including in the form of a record, book, register, correspondence, other documents or materials.]

Part A: Recipients of the Disclosed Information 1. Please state the name and identification/registration number of the parties who are permitted to receive the disclosed Customer Information/ documents. 2. Please provide identification documents to support the information provided, such as copies of National Registration Identification Card (NRIC) and Company/Business Registration Number.		Part B: Type of Documents/ Information for Disclosure Please select from categories below, or state a type of document/Customer Information to be disclosed.		Part C: Purposes for Disclosure Please select from purposes mentioned below, or state a specific purpose where disclosure is permitted.																														
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For the Bank Use Only	
<u>Officer Receiving Form</u> Signature: Name: Designation: Date:	<u>Approval to Disclose Customer Information</u> Signature: Name: Designation: Date:
<p><i>Notes to the Bank's staff:</i></p> <ol style="list-style-type: none"> <i>Requestors shall be advised to use a separate form if there is insufficient space to state / specify all of the intended recipients of the disclosed information.</i> <i>When receiving and processing this form, staff shall inform the Requestor of:</i> <ol style="list-style-type: none"> <i>his/her/their rights to withdraw/revoke the consent at any time, unless such disclosure is necessary for the Bank to comply with any legal or contractual requirements; and</i> <i>the steps to be taken to withdraw/revoke consent.</i> <i>If the Requestor withdraws/revokes his/her/their consent, the Bank must cease disclosure of the Customer Information within seven (7) calendar days from the date of the Bank receives the withdrawal/revocation form from the Requestor.</i> <i>Bank's staff shall ensure sufficient supporting document(s) are presented by the Requestor to the Bank's staff for identity verification before submitting this disclosure form.</i> 	