

## **REFUNDABLE DEPOSIT CLAIMING FORM (Official Use)**

Full Name (as per I/C):		· · · · · · · · · · · · · · · · · · ·
IC/Passport No. :	M/ship No:	
Address :	, l , p	
		Ţį.
Telephone No:	(H)	(H/P)
	(payment a	
	O.R. NO dated	
AMOUNT: RM500.00 / RM	11, 000.00	
To be refunded to the PRING	CIPAL/NOMINEE as stated above and to	o deduct outstanding of
RM	Balance to be refunded RM	
Ι,	as the name stated above am fully aware that:	
my deposit refund will l	be release via online transfer to my bar	nk account as per below:
BANK ACCOUNT DETAIL Bank Name: Bank Account No:		
Other remarks:		<del></del>
transfer / termination of no (Please state your reasons or	oe process within 21 working days from the process within 21 working days within 21 workin	*
Signature:	Da	ite: