

PUBLIC BANK BERHAD / PUBLIC ISLAMIC BANK BERHAD

Application for Repayment Moratorium or Rescheduling

Date:

Hire Purchase Account No:

Account Holding Branch:

Vehicle No:

Application for:
 Moratorium
 Rescheduling
(Please tick either one)

Request for Repayment Moratorium or Rescheduling for Hirer affected by COVID-19 outbreak

1. Customer Particulars	
Hirer's Name :	
NRIC No. :	
Mailing Address :	
E-mail Address :	

2. Work Place Particulars			
Employment :	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Salaried	
Company Name :			
Office Address :			
Telephone Number :		Monthly Income :	
Years of Services or Business :			
Industry :	<input type="checkbox"/> Tourism	<input type="checkbox"/> Hotel	<input type="checkbox"/> Logistic
	<input type="checkbox"/> Shipping	<input type="checkbox"/> Airlines	<input type="checkbox"/> Shopping Mall/ Retail Business
	<input type="checkbox"/> F&B	<input type="checkbox"/> Education	<input type="checkbox"/> Entertainment
	<input type="checkbox"/> Recreation	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> China Related Business
	<input type="checkbox"/> Others (please specify):		

3. Brief description on how COVID-19 has affected you

I/We hereby understand that this application for moratorium or rescheduling is subject to the Bank's sole and absolute discretion to approve or decline the same.

I/We hereby declare that the above information together with the supporting documents provided herein (if any) are true and accurate. I/We understand that Public Bank Berhad reserves the right to reject this application without assigning any reason in the event that the information given is found to be untrue or false.

Yours sincerely

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Name :