



PHILLIP CAPITAL SDN BHD Co. Registration: 199501033331 (362533-U)
 (Formerly known as Phillip Futures Sdn Bhd)
 (A Trading Participant of Bursa Malaysia Derivatives Berhad & A Participating Organization of Bursa Malaysia Securities Berhad)

B-18-6, Block B Level 18 Unit 6, Megan Avenue II, No 12 Jalan Yap Kwan Seng, 50450 Kuala Lumpur, Malaysia
 Tel: (603) 2783 0388 | Fax: (603) 2783 0399 | Email: pcsb_enquiry@phillipcapital.com.my
 Website: www.phillip.com.my

REQUEST FOR CLOSURE OF ACCOUNT

Client's Name: _ A/C Number

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To Phillip Capital,

I/We hereby authorize you to close my account with effect from _____

A. REASON FOR CLOSURE

- | | |
|---|--|
| <input type="checkbox"/> No time / Dormant Account
<input type="checkbox"/> Change to other account
– A/C No: _____

<input type="checkbox"/> Others: _____ | <input type="checkbox"/> Not Satisfied With Service:
<input type="checkbox"/> With staff
<input type="checkbox"/> With platforms
<input type="checkbox"/> With Commission Charges
<input type="checkbox"/> Others: _____ |
|---|--|

B. INSTRUCTIONS (Please check (X) where applicable):

- Cheque to be collected personally
- Authorization for cheque collection by Mr/Mdm _____ of NRIC _____
- Quick Cheque Deposit
 Bank Name: _____ Bank A/C No.: _____
- Internet Banking Transfer
 Bank Name: _____ Bank A/C No.: _____
- Telegraphic transfer (TT)
 Bank Name: _____ Bank A/C No.: _____
- Transfer to Phillip Capital Group: PMB PCM Other, Please Specify: _____
 Account Type: _____ A/C No: _____

Yours faithfully,

Acknowledged receipt of cheque,

 Client's Signature

 Name & Signature

Date:

Date:

FOR OFFICE USE ONLY			
As at (Date)	Dealer Name & Signature	Approved By	Client's Signature Verified
Extracted/Prepared By	Equity Balance	Excess Funds	Balance After Withdrawal
Checked By	Remarks		