

AUTO DEBIT CANCELLATION FORM

CUSTOMER ACCOUNT INFORMATION

Gas Malaysia account no. :

Name on Gas Bill : _____

Address on Gas Bill : _____

Contact no. (HP) : _____

Contact no. (H) : _____

Contact no. (O) : _____

AUTO DEBIT CANCELLATION DECLARATION

I hereby wish to cancel auto debit for the above account number. My credit card details are as follows:-

Primary Credit Card Account

Credit Card No :

Name on credit card : _____

(exactly as printed) _____

Issuing Bank : _____

Issuing Country : _____

Credit card expiry date : _____

Signature : _____

Secondary Credit Card Account

Credit Card No :

Name on credit card : _____

(exactly as printed) _____

Issuing Bank : _____

Issuing Country : _____

Credit card expiry date : _____

Signature : _____