

TERMINATION & REFUND FORM

*** The refund process will take approximately 2 months.

A. TO BE FILLED BY CUSTOMER

1. Request Type [Please tick one (1) only]

<input type="checkbox"/>	(a) Account Cancellation (Close Account)- Please provide IC copy for verification	(d) Refund Excess Payment only. No termination required
<input type="checkbox"/>	(b) Temporary Suspension for 3 Months (all arrears settled)	(e) Request Letter to Jabatan Akauntan Negara (for Unclaimed Money case)
<input type="checkbox"/>	(c) Termination Request by the New Owner - Please provide the ownership proof (SPA or condo maintenance bill)	(f) Others : _____

2. Applicant Information

Account No.		Telephone No.	
Name on Gas Bill		Effective Termination Date (backdated is not allowed)	
		Reason for Termination	
Address on Gas Bill			

3. Refund Details (***) Applicable for Request Type (a) & (d)*** only

Full Bank Name		IC No	
Bank Account No		Passport No	
Bank Account Holder's Name		Business Registration No	
Email Address (to notify on completion of refund transfer)			

Requested By

Signature : _____

Name : _____

Date : _____

Company Stamp (For account registered under a company)

B. TO BE FILLED BY GAS MALAYSIA RETAIL SERVICES SDN BHD

Status During Request		Counter		Credit Control
Status		Signature		
Supply Type		Name		
Deposit		Date		
Outstanding		Remark		
Disconnection Information			Account Information	
Work Order Date		Deposit In UBIS		
Disconnection Date		Arrears		
Meter Reading		Refund Amount		
Meter Serial No		Bank Code		
Completed By		Checked By		Confirmed by
Signature				
Name				
Designation				
Date				