## ARAHAN PEMBAYARAN KAD KREDIT MASTERCARD KORPORAT

## PAYMENT INSTRUCTION FOR CORPORATE MASTERCARD CREDIT CARD

To: Bank Islam Brunei Darussalam Berhad Lot 159, Jalan Pemancha Bandar Seri Begawan BS8711 Negara Brunei Darussalam

Please debit from our Account No.						
8% of Outstanding Balance (Minimum Mandatory Payment) (Note: The minimum payment is subject to change from time to time and as prescribed by the Authority)						
Commencing on every 15th day of the month.						
Immediate payment of:						

We understand and agree that the Bank accepts this payment instruction subject to the following terms and conditions:

- 1. We hereby acknowledge the Bank may, at its discretion, undertake verification procedures to confirm the identity of any authorised person(s) issuing the payment instruction(s). We agree to fully cooperate with such verification procedures. Furthermore, we acknowledge that the Bank retains the right to decline any payment instruction(s) if it is unable to satisfactorily verify the identity of the authorised person(s), or if there are any concerns regarding the authenticity, clarity, or completeness of the given instruction(s). The Bank is also entitled to refuse to process instruction(s) due to other considerations, which may not be disclosed to me/us, as part of its risk management and compliance policies.
- 2. We acknowledge that the Bank performs a reasonable level of verification to determine the authenticity of the unauthorised instruction(s). However, the Bank does not guarantee the detection of all unauthorised instructions unless there are obvious errors or discrepancies within the presented documentation that would reasonably lead to questioning the authenticity of the instruction(s).
- 3. We will ensure that sufficient funds are available in our account(s) to meet the payment(s) under this instruction(s).
- 4. Notwithstanding paragraph 3 above, whilst the Bank will endeavour to carry out this instruction(s), we acknowledge the Bank retains absolute discretion to decline executing the instruction(s) without assigning any reason. If there are insufficient funds in our account(s), the Bank shall have the right to decline the instruction without notice to us and the Bank may levy a charge for any such unsuccessful transaction(s).
- 5. The Bank's records of instruction(s) received will serve as conclusive evidence of the contents of our instruction(s), barring manifest error.
- 6. Notwithstanding the death or bankruptcy of any authorised signatory, the Bank will continue to honour the instruction(s) set forth herein until such time as the Bank receives formal written notification of the signatory's death or a legal declaration of bankruptcy. Upon receipt of such notification, the Bank will, in its absolute discretion, act in accordance with the relevant laws and Terms relating to the Card Account and use of Card, determine the continued appropriateness of executing such instruction(s).
- 7. This instruction(s) is binding and remains in full force until written revocation is received by the Bank at least two (2) weeks prior to the debit date.
- 8. We agree to fully indemnify and hold the Bank harmless against any and all actions, claims, losses, damages, costs, expenses, fees, liabilities, and charges (including legal costs) for carrying out our instruction(s), including but not limited to situations where the Bank, acting in good faith, executes instruction(s) which at the time of processing are reasonably believed to be authentic and valid, even if such instruction(s) are subsequently found to be unauthorised, misunderstood, or erroneous.
- 9. We consent to the Bank's disclosure of any information related to our instruction(s) to relevant parties as deemed necessary by the Bank.

All information provided in this form is true and complete. By signing this form, we authorise the Bank to verify the provided information and acknowledge that the Bank has the right to reject this instruction without any obligation to provide a reason. We confirm that we have read, understood, and agree to be bound by the terms set out above.

IN CONSIDERATION of the Bank agreeing to accept this payment instruction, we hereby undertake to indemnify the Bank against all losses, costs damages, expenses, claims and demands which the Bank may incur or sustain by reason of the Bank carrying out our instruction.						
Company Name:						
Address:						
Telephone No. (Office): Handphone No.:						
	Signature of Authorised	Signatory		dd mm yy Date		
notice of any amendment(s) to the standing instruction must be given to the bank at least two (2) weeks before the payment date						
*Please tick ( $\sqrt{\ }$ ) in boxes where applicable						
SIGNATURE VERIFIED	OFR	CLK	Ref No.		For Bank Use Only	