

## Opt for e-Payment

To enjoy the convenience of having your payments credited directly into your bank accounts

**Benefits of e-Payment :**

- \* Fast access to funds as payment will be credited directly to your bank account
- \* Eliminate incidents of misplaced, lost or expired cheques and unauthorised deposit of cheques
- \* Eliminate the inconvenience of having to go to bank to deposit the cheques

To : Accounts & Finance Department  
Lonpac Insurance Bhd  
7th Floor, Bangunan Public Bank  
6 Jalan Sultan Sulaiman  
50000 Kuala Lumpur  
( Ms Astrid / Ms Lee San / Ms Joey)

### ELECTRONIC CREDIT PAYMENT (ECP) AUTHORISATION FORM

1. Name / Company Name : \_\_\_\_\_

2. Beneficiary IC / Business Registration No. : \_\_\_\_\_

3. GST Registration No : \_\_\_\_\_

4. Address : \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_

5. Bank Account Details (Photocopy of Bank Statement / Bank Savings Book must be attached)

Beneficiary Name : \_\_\_\_\_

Bank Name : \_\_\_\_\_

Bank Account No. : \_\_\_\_\_

6. E-mail ADDRESS : (a) adm@mxm.com.my  
(For notification of payment details) : (b) \_\_\_\_\_

7. Telephone No. : \_\_\_\_\_ (Office) \_\_\_\_\_ (HP)

8. Fax No. : \_\_\_\_\_

I hereby authorise Lonpac Insurance Bhd to remit all payments directly to the above nominated account. A copy of the bank statement / bank savings book showing the account number and account holder is attached.

\_\_\_\_\_  
Authorised Signature and Company Stamp

Date :

For Lonpac Use		
	Signature	Date
Verified by :		
1st Approved by :		
2nd Approved by :		