

Refund Application Form

Name of Trust Company / Applicant			
Contact Person & Telephone Number			
Details of Labuan Entity	Name:	Registration/Company No:	
Amount	RM/USD:	Receipt/Transaction Reference:	
Reason or justification for refund application (to enclose supporting documents including copy of official receipt and other related documented evidence including statement of bank account deducted, email, etc.)			
Detail Information of Bank Account for refund payment :-			
Beneficiary Name			
Name of Bank			
Account Number			
Business Registration No.; or Identity Card No. (for payment to individual bank)			
Signature of Trust Officer / Authorised Person		Date:	
Lodgment Date in COR@L (via Other Application - applicable for application for client company)			
FOR LABUAN FSA USE ONLY			
Prepared By	Name:	Signature:	Date :
Checked By	Name:	Signature:	Date :
Approved By (via MSGP)	Name:	Signature:	Date :
Remarks:			