



## REFLEX Service Request Maintenance Form

Account Maintenance

nch.	ions and submit the Service Request Maintenance For	rm along with required supporting document(s) (where ap	oplicable) to the account holding RHB Ba
orporate Details			
orate Name			
orate ID		Corporate Primary Account No.	
quest Details (Please	e tick 🗸 whichever applicable)		
Change Billing Acc	count		
Account No.		Account NameAcc	count Name
		Trade Draft service(Please attach separate sheet for	more accounts)
			e-Generated Trade Draft
		Account Name	e-Generated Trade Draft
	ent (Please attach separate sheet for more account		The cach substantly recount
3rd Party Acc			
Srararey Acc	Account Number	Beneficiary Name	Resident Status (R/NR)
1.	Account Namber	belieficially Name	Resident Non-Resident
2.			Resident Non-Resident
,			
3.			Resident Non-Resident
IBG			
1.	Account Number	Beneficiary Name	Resident Status (R/NR)
			Resident Non-Resident
	Beneficiary Bank	IC / Passport / BR No.	
<u> </u>			_
2.	Account Number	Beneficiary Name	Resident Status (R/NR)
			Resident Non-Resident
	Beneficiary Bank	IC / Passport / BR No.	
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3.	Account Number	Beneficiary Name	Resident Status (R/NR)
			Resident Non-Resident
	Beneficiary Bank	IC / Passport / BR No.	
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RENTAS			
1.	Account Number	Beneficiary Name	Resident Status (R/NR)
		•	Resident Non-Resident
	Beneficiary Bank	IC / Passport / BR No.	
2.	Account Number	Beneficiary Name	Resident Status (R/NR)
		•	Resident Non-Resident
	Beneficiary Bank	IC / Passport / BR No.	
		<u> </u>	
3.	Account Number	Beneficiary Name	Resident Status (R/NR)
			Resident Non-Resident
	Beneficiary Bank	IC / Passport / BR No.	
			_
claration			
	I/we am/are authorized to act for and on behalf of th	he Company/Association/Club/Society/Partnership/ Agen	ncv/Entity.
-		n related to this application is true and accurate to the be	
pplication.	att information provided herein and in any other form	Tretated to this application is true and accurate to the be	est of my/our knowledge as at the date
thorised Signatory/i	es		
C	atom 1	Cianatam, 2	Company Street
Signa	atory 1	Signatory 2	Company Stamp
·*		Name*	
nation*		Designation*	
*/Passport*		NRIC*/Passport*	





For BANK use only	
Branch Code	Date D D M M Y Y Y Y
Processing Checklist:	Verified by,
	Signature Name: Designation:
	24.4 Nov. 2022

v4.4 Nov 2022