

E-COMM MERCHANT APPLICATION FORM (E - FOR E-COMM ONLY)

Important Notice: Please read and understand the terms and conditions of the services before you decide to apply and if you do not understand any of the terms and conditions, you may clarify with the Bank.

This is an editable PDF Form, handwritten application form is not acceptable. You may type on this form and print it out for submission to the Bank for processing. Please use CAPITAL letters and tick (✓) boxes where applicable. For step by step guidance on how to fill in this form, please visit CIMB website at <https://www.cimb.com.my>. Please submit duly completed Application Form to any CIMB branches or Business Centers.

<input type="checkbox"/> New Merchant <input type="checkbox"/> Existing Merchant	Application Date <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">/</td><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">/</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td> </tr> </table>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y		

Connection Type

<input type="checkbox"/> CIMB Bank Direct	- Please complete the application form (part 1 - part 6)
<input type="checkbox"/> To Bank Approved Vendor	- Please complete the application form (part 1 only) <i>With this, I / We hereby give my / our consent to CIMB to share the relevant information to the Bank Approved Vendor for the application of the product(s) / facility(ies)</i>
<input type="checkbox"/> eGHL	<input type="checkbox"/> iPay88

▶ PART 1 - MERCHANT INFORMATION

<p>Registered Name <input style="width: 100%;" type="text"/></p> <p>Trading Name <input style="width: 100%;" type="text"/></p> <p>Nature of Core Business <input style="width: 100%;" type="text"/></p> <p>Business Registration Number (Old) <input style="width: 100%;" type="text"/> (New) <input style="width: 100%;" type="text"/> <i>Only alphabet and numeric, without spacing is allowed</i></p> <p>Business Website / Live URL (if applicable) <input style="width: 100%;" type="text"/></p>	<p>Address <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> Postcode <input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/> City State Country</p> <p>Contact Person's Name <input style="width: 100%;" type="text"/></p> <p>Contact Person's Mobile Number <input style="width: 100%;" type="text"/></p> <p>Contact Person's Email Address <input style="width: 100%;" type="text"/></p>
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▶ PART 2 - SERVICE PROVIDER INFORMATION (CHECK ALL THAT APPLY)

<p><input type="checkbox"/> Web Hosting Provider</p> <p>Registered Name <input style="width: 100%;" type="text"/></p> <p>Contact Person's Name <input style="width: 100%;" type="text"/></p> <p>Contact Person's Mobile Number <input style="width: 100%;" type="text"/></p> <p>Contact Person's Email Address <input style="width: 100%;" type="text"/></p>	<p><input type="checkbox"/> Payment Gateway Service Provider</p> <p>Registered Name <input style="width: 100%;" type="text"/></p> <p>Contact Person's Name <input style="width: 100%;" type="text"/></p> <p>Contact Person's Mobile Number <input style="width: 100%;" type="text"/></p> <p>Contact Person's Email Address <input style="width: 100%;" type="text"/></p>
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▶ PART 2 - SERVICE PROVIDER INFORMATION (CHECK ALL THAT APPLY)... CONTINUED **Payment Application Service Provider**

Registered Name

Contact Person's Name

Contact Person's Mobile Number

Contact Person's Email Address

 Other Service Provider (If any)

Registered Name

Contact Person's Name

Contact Person's Mobile Number

Contact Person's Email Address

▶ PART 3 - ONLINE PAYMENT METHOD REQUIRE

-
- Direct Link (payment request via website payment page)
-
-
- Payment Link (online payment request via URL shared by the merchant to customer)

▶ PART 4 - CARD PAYMENT NETWORK SOLUTION

What types of card payment network solutions does your business serve?

-
- Fully Outsource**
-
- (Merchant E-commerce website is fully outsourced payment pages/activities to PCI DSS compliant Payment Gateway Service Provider)
-
- Form and Action Required
-
- *SAQ A

-
- Partially Outsource**
-
- (Merchant E-commerce website partially outsourced payment pages/activities to PCI DSS compliant Payment Gateway Service Provider. Merchant website has access to, or the ability to control payment card data)
-
- Form and Action Required
-
- *SAQ A-EP
-
- *ASV Scanning
-
- *Penetration Test

-
- Self-hosted**
-
- (E-commerce merchant accepts card payment data using own website payment page)
-
- Form and Action Required
-
- *SAQ D
-
- *ASV Scanning
-
- *Penetration Test

* Self Assessment Questionnaire (SAQ)

* Quarterly network vulnerability scans by Approved Scanning Vendor (ASV)

▶ PART 5 - PRODUCT / FACILITY TYPE

The following are the merchant discount rate (MDR) in relation to the product / facilities selected.

Transaction Type		MDR		
		On-us	Off-us	
<input type="checkbox"/>	Cards	Visa / Master Credit (Local)		
		Visa / Master Debit (Local)		
		Visa / Master Debit (Int)		
		Visa / Master Credit (Int)		
<input type="checkbox"/>	Easy Pay Plan	3 months		Min. Amount = <input style="width: 50px;" type="text"/>
		6 months		Min. Amount = <input style="width: 50px;" type="text"/>
		12 months		Min. Amount = <input style="width: 50px;" type="text"/>
		18 months		Min. Amount = <input style="width: 50px;" type="text"/>
		24 months		Min. Amount = <input style="width: 50px;" type="text"/>
		36 months		Min. Amount = <input style="width: 50px;" type="text"/>

▶ PART 6 - MERCHANT'S DESIGNATED ACCOUNT (MANDATORY)

I / We would like to tag my Bank Account No. stated below as my Merchant's Designated Account into which the Bank may make payments, arising from the merchant services, by way of a direct credit:

Please tick (✓) one

CIMB Account Number

Inter-Bank Giro Current Account Number Bank

▶ PART 7 - DECLARATION BY APPLICANT / AUTHORISED SIGNATORY FOR THE APPLICANT

By signing this Application Form, I / we confirm that:

1. All the information in this application form are true, accurate and complete. CIMB Bank Berhad ("**Bank**") is authorised to rely on its records in relation to details of my / our major shareholders, ultimate beneficial owner, directors, partners, sole proprietor, office bearers and/or authorised persons as provided in relation to the current account specified by me / us in this application form ("**Merchant's Designated Account**"). I / We undertake to inform the Bank of any changes.
2. I / We will not facilitate funds from proceeds of any unlawful activities to be channelled through my / our account(s) with the Bank and undertake to provide the Bank with all relevant information and documents, as and when requested, for purpose of my / our identification and/or verification of the source of my / our funds under the "Know-Your-Customer" principle.
3. I / We confirm that the Bank is authorised to verify and/or conduct any checks and/or obtain any information and/or confirmation from CCRIS or any credit reference / reporting agencies registered under the Credit Reporting Agencies Act 2010, and for such party(s) to process and disclose my / our information to the Bank to consider this application. I / We am/are aware that such information may include information on my / our status and/or any of my / our directors, shareholders, officers, and/or any other person, individual and/or entity related to and/or associated with me / us. I / We also consent and authorise the Bank to disclose any of my / our credit information to any such credit reporting agencies and for them to further transmit such information to their subscribers for purposes of fraud detection and fraud prevention.
4. I / We hereby agree that this completed application form shall belong to and remain the property of the Bank regardless whether this application is approved and the Bank reserves the right to reject my / our application at its sole discretion without any reasons whatsoever. Any documents submitted by me / us to the Bank are non-returnable. I / We agree to provide any additional documents requested by the Bank for the processing of my / our application.
5. I / We authorise the Bank to deduct the terminal and/or MPOS rental charges (if applicable), merchant discount, fees and charges and other sums of money (if any) due to the Bank arising out of the merchant services (collectively "**Fees and Charges**") from my / our sales proceeds and/or to debit or cause to be debited such Fees and Charges from the Merchant's Designated Account without further reference to me / us.
6. I / We hereby undertake to maintain sufficient funds in the Merchant's Designated Account at all times to pay the Fees and Charges and any other payments that I / we shall make from the Merchant's Designated Account including cheques that are issued (if any). I / We agree that the Bank will not be held liable for defamation and/or for breach of contract and/or for any losses, damages, expenses, costs or charges which may be claimed arising from the Bank making deductions pursuant to my / our above authorisation and/or pursuant to any remarks placed on the returned cheque(s) by the Bank and/or if the cheque(s) issued was returned due to insufficient funds in the Merchant's Designated Account.
7. I / We hereby agree that the Product(s) / Facility(ies) if made available shall be subject to:
 - (i) the terms and conditions of this application form;
 - (ii) the Approval Notification Letter to be issued and sent by the Bank to the Applicant upon approval of this application;

▶ PART 7 - DECLARATION BY APPLICANT / AUTHORISED SIGNATORY FOR THE APPLICANT... CONTINUED

- (iii) the Merchant Services Terms and Conditions read together with the applicable appendix(ces) which are published on the Bank's website at www.cimb.com.my/merchantsolutions; and
 - (iv) the Operating Policies and Procedures of PayNet
- (collectively the terms and conditions stated in items (i) to (iv) above shall be referred to as the "Terms").
- My / Our use of the Bank's Product(s) / Facility (ies) signifies my / our unconditional acceptance of the Terms.
8. I / We agree to the routing of all my / our debit card transactions to the lowest cost debit card routing. I / we understand that if I / we decide to opt-out of the lowest cost option and agree to pay more to route all my/our debit card transaction to either the MyDebit network or Visa/Mastercard network, I / we will need to notify the Bank in writing via the Bank's standard form.
9. I / We assure the Bank that I / we will operate the Product(s) / Facility(ies) based on the Payment Card Industry Data Security Standards (PCI-DSS) requirement set by PCI Security Standards Council (PCI SSC) (if applicable).
10. I / We also fully understand the following key terms which have been specifically pointed out to me / us:-
- (i) The Bank's Approval Notification Letter is a computer-generated letter setting out the Fees and Charges and other commercial terms, and is to be read together with and forms part of the Terms.
 - (ii) If any person disputes the validity of any transaction or if I / we breach any of my / our obligations, the Bank may chargeback transactions and debit or cause to be debited the same from my / our accounts and/or the Bank may refuse to pay me / us the amount of the transaction. The authorisation of any transaction is not a guarantee of payment by the Bank.
 - (iii) If I / we fail to provide to the Bank any requested information or documents reasonably required by the Bank within seven (7) business days from the Bank's request, or if the Bank has reasonable grounds to suspect that I / we have breached or intend to breach any of the Terms or suspicious or abnormal settlement transactions are detected or due to regulatory reasons, the Bank may suspend the operation of all or any of the Products / Facilities by service of notice on me / us. If the suspension notice is **not** revoked by the Bank within seven (7) business days or such other extended period as stated in the suspension notice, the Bank may immediately terminate the Products / Facilities which were suspended by giving me / us notice of the termination.
 - (iv) Either party may terminate any of the Products/Facilities for convenience without cause by giving the other party thirty (30) days' prior written notice.
 - (v) I / We shall notify the Bank immediately of any change in my / our contact details.
 - (vi) If I / we do not agree to the Terms, I / we shall notify the Bank immediately and return all the Bank's materials to the Bank and I / we must not use the Bank's merchant services or submit charges to the Bank for processing. Usage of the Bank's merchant services or submission of charges to the Bank for processing signifies my/our unconditional agreement to the Terms.
 - (vii) The Bank may amend the Terms by giving me / us at least twenty-one (21) days prior notice by posting the notice of amendment on the CIMB Merchant Electronic Online Portal (e-Access) or the Bank's website or by any other means of notification as specified in the Merchant Services Terms and Conditions.
11. I / We hereby authorise the Bank to register me / us for the CIMB Merchant Electronic Online Portal (e-Access) service with the email address specified in this application form.
12. I / We understand and agree the Merchant's Designated Account must be a current account with CIMB Bank Berhad or CIMB Islamic Bank Berhad. I / We shall not change or close the Merchant's Designated Account without the Bank's prior written consent. If the Merchant's Designated Account is changed or closed by me / us without the Bank's prior written consent or where the Merchant's Designated Account is closed for any reasons whatsoever in accordance with the terms and conditions governing the Merchant's Designated Account, the Bank may terminate the Product(s) / Facility(ies) by giving me / us written notice.
13. **PRIVACY NOTICE ACKNOWLEDGEMENT**
- I / We hereby acknowledge that I / we have accessed and/or read the Privacy Notice issued by CIMB Group (which is available at all CIMB branches as well as at the CIMB website at www.cimb.com.my or has otherwise been made available to me / us) and confirm my / our agreement to the same.
14. I / We warrant to the Bank that I / we have the power to apply for the Product(s) / Facility(ies) and the undersigned have been authorised to sign this application form and to perform my / our obligations under the Terms.

▶ SIGNATURE OF APPLICANT(S) / AUTHORISED SIGNATORY(S)

Note: The applicant(s) / Authorised Signatory(s) is authorised to operate the Merchant's Designated Account as per the Bank's record.

Name

Name

Identification Number (NRIC/Passport)

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Identification Number (NRIC/Passport)

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Designation

Designation

Name

Name

Identification Number (NRIC/Passport)

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Identification Number (NRIC/Passport)

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Designation

Designation

► FOR BANK'S USE ONLY

For Sales Officer

Sales Channel <input type="checkbox"/> MSF <input type="checkbox"/> SME <input type="checkbox"/> CSD <input type="checkbox"/> Others: <input style="width: 40px;" type="text"/>	RED Team Code <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/>	Branch Code <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	Staff ID <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
Staff Name <input style="width: 90%; height: 20px;" type="text"/>			
Staff Signature <div style="border: 1px solid black; width: 100%; height: 80px;"></div>			

Verification By Bank Officer

I have verified that:

(a) the authorised signatory for the Applicant is the person authorised to operate the Merchant Designated Account in the Bank's record; and

(b) the business/company registration number of the Applicant is same as the business/company registration number in the Bank's record.

Signature of the Bank Officer <div style="border: 1px solid black; width: 100%; height: 80px;"></div>	Name <input style="width: 90%; height: 20px;" type="text"/> Designation <input style="width: 90%; height: 20px;" type="text"/> Staff ID <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
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HOW DO YOU START TO PROTECT CARD DATA TODAY?



Use strong passwords



Install patches from your payment terminal vendor



Protect in-house access to your card data



Use anti-virus software



Use secure payment systems



Make your card data useless to criminals



Protect card data and only keep what you need



Ask your vendor partners for help if you need it



Limit remote access for your vendor partners, don't give hackers easy access



Get regular vulnerability scanning



Protect your business from the Internet