



Maintenance Form

URGENT

Approved by Head of MPS / Sales:

Signature	Name :
	Designation :
	Date :

Registered Name

Merchant Number -

(Please complete the attached listing if more than 1 MID)

Request to change for the following (to tick in the respective box and fill in data which request for changes only)

Principal Information CardLink MyDebit MPOS Portal E-Commerce Auto Bill (RPS) Loyalty

Registered Name (Please attach supporting documents ie. Form 13 or Company Resolution)

Trading Name Registered No (Without Special Character)

(System can capture 25 characters only)

Address

Contact Name 1

Contact Name 2

Address Line 1

Address Line 2

Address Line 3

Address Line 4

City Postcode State

Telephone No. - Fax No. -

Email Address CardLink Eaccess E-Commerce Auto Bill (RPS)

Email Add:

Plug n Pay / (TAP & PAY)(For activation purposes) - If applicable

Contact Person: HP No: -

Email Add:

Add User E-Commerce Auto Bill (RPS)

Contact Person: Contact No: -

Email Add:

***Default Routing**

Default Routing Option MyDebit Routing International Debit Routing (Please attached Default Routing form and sign off by Merchant or

Note: Change of Default Routing applicable for deployment more than 6 months only Merchant confirmation or MPS Notification to Merchant)

MERCHANT DISCOUNT RATE or MINIMUM AMOUNT

		EDC / PnP (MPOS) / Tap n Pay	OTHERS						RM	
			BP	DCC	MPOS RPS	ECOMM	MOTO/RPS/RPS(ECOM Credential on File)	JOMPAY / CLICKS	Static QR	<input type="checkbox"/> JomPAY/Clicks <input type="checkbox"/> Mydebit
Credit (Visa / Master)	Int'l	%		%	%	%	%	%	%	
	Off-us	%			%	%	%	%	%	RM
	On-us	%	%		%	%	%	%	%	RM
Debit (Visa / Master)	Int'l	%		%	%	%	%	%	%	
	Off-us	%			%	%	%	%	%	RM
	On-us	%			%	%	%	%	%	RM
MyDebit	Off-us	%								RM
	On-us	%								RM
JCB	Int'l	%								
	Off-us	%								
CUP	Int'l	%								
	Off-us	%								
D u i t n o w Q R	Credit Card	Off-us	%						%	
		On-us	%						%	
	CASA	Off-us	%						%	
		On-us	%						%	
Ewallet	Off-us	%						%		
QR	TNG	Off-us	%							
	Alipay	Int'l	%							

IPP							
<input type="checkbox"/> EDC/MPOS		<input type="checkbox"/> ECOMM		<input type="checkbox"/> MOTO			
<input type="checkbox"/> 6 Months		<input type="checkbox"/> 12 Months		<input type="checkbox"/> 24 Months		<input type="checkbox"/> 36 Months	
(Min Amt RM.....)		(Min Amt RM.....)		(Min Amt RM.....)		(Min Amt RM.....)	
Credit (Visa / Master)	On-us	%	%	%	%	%	%

Credit (Visa / Master)	SCAP	Brand IPP	Issuer IPP
	%	%	%

Officer Code or Branch Reference Code

MPS Officer Code (QMIH Page 1) Branch Staff Code (QMIH Page 8 : User Defined A7 & A9)

*MID & TID Reactivation (Applicable to MID & TID Terminated Less Than 6 months). Submit a fresh application if MAIN MID & TID terminated more than 6 months.

MID TID Require Installation MID termination >6 months : to provide other active acceptance MID (Eg; IPP) MID No Installation Required

SUSPENSION

Suspension of MID

TID 1: TID 2: TID 3: TID 4:

MPOS Portal : deactivate TID

*TERMINATION OF MID & TID

Termination : All Acceptance (Main, DCC, CUP, BP, IPP) (Please ensure no sharing MID)

Termination : EDC

Termination of merchant Account (MID) (Please complete the attached listing if more than 1 MID)

Termination of all TID as per MID indicator above TID 1: (Please complete the attached listing if more than 1 TID)

Retrieval Terminal: Yes Refund Deposit: Yes (Note : TMU will check if any deposit to be refunded during retrieval)

Closure of selective TID as per MID indicator above TID 1: (Please complete the attached listing if more than 1 TID)

Retrieval Terminal: Yes Refund Deposit: Yes (Note : TMU will check if any deposit to be refunded during retrieval)

Termination : MPOS / Tap & Pay

Termination of merchant Account (MID)

Termination of all TID as per MID indicator above TID 1: (Please complete the attached listing if more than 1 TID)

Retrieval Terminal: No Refund Deposit: Yes Deposit Amount : RM (To be Completed by AO-TMU)

Closure of selective TID as per MID indicator above TID 1: (Please complete the attached listing if more than 1 TID)

Retrieval Terminal: No Refund Deposit: Yes Deposit Amount : RM (To be Completed by AO-TMU)

For CANCELED DEPLOYMENT CASES - To Reverse MPOS Fee waiver Yes No

Please indicate TID (if partial from the list stated above) : to

Termination : Partial Acceptance (to initialize terminal) please provide Main MID & TID

Walk in TID (Please complete the attached listing if more than 1 TID)

Deposit Yes No

If Yes : To transfer to next active MID & TID (Eg : IPP) Please complete the attached listing if more than 1 TID

Ecomm RPS

(To provide Main MID & TID for acceptance below)

IPP DCC DCC Form Attached

MOTO UPI

BP Others

Main MID

Main TID (Please complete attached listing if more than 1 TID)

Payment Details

Payment Frequency Monday Tuesday Wednesday Thursday Friday

Account Number Bank :

CR Method E0 (CIMB BANK) G0 (Giro) R0 (Rentas)

Bank Routing Code/: 02050 CIMB (035) 02322 AFB (032) 02128 ALB (012) 02089 AMB (008) 03509 ALRB (053)

IBG Code 02458 BIM (045) 03415 MUAB (041) 33061 AGRO (049) 16020 BR (002) 16017 BSN (010)

02076 BOA ((007) 02102 BTM (052) 02636 BNP (060) 02173 CITI (017) 02199 DEUT (019)

02241 HLB (024) 02225 HSBC (022) 02597 ICBC (059) 02157 JPMC (048) 03460 KFH (047)

02270 MBB (027) 02610 MCB (073) 02296 OCBC (029) 02335 PB (033) 02021 RBS (046)

02186 RHB (018) 02144 SCB (014) 02623 SMBC (051) 02267 UOB (026) 02429 BOC (042)

(Please attach bank statement for the above Inter-Bank Giro Current account)

Reason to change Payment Mode Merchant Request Payment Reject Others

AUTHORISED SIGNATORY

I confirm that to my knowledge the information given hereinabove is true and accurate.

Signature

Name : Designation : Date :

FOR OFFICE USE ONLY

Merchant Partners Solutions

Waiver Rental

Remove Rental TID [] [] [] [] [] [] [] [] [] [] (Please complete the attached listing if more than 1 TID)

Terminal Mode

Retail Tips (F&B) Pre-Auth (Applicable for Hotel, Hospital & Car Rental only) Others: _____

Change of MCC

MYDEBIT [] [] [] [] [] [] Master Card [] [] [] [] [] [] VISA [] [] [] [] [] [] JCB [] [] [] [] [] [] UPI [] [] [] [] [] []

Approved by AO :

Signature _____ Name : _____
Designation : _____
Date : _____

MOTO & Offline

Pre-Auth & Offline (Applicable for Hotel, Hospital & Car Rental only) - Offline for Walk-In only, not applicable for MOTO account Refund

Approved by Head of MPS :

Signature _____ Name : _____
Designation : _____
Date : _____

Approved by FMU :

Signature _____ Name : _____
Designation : _____
Date : _____

MPOS Capping review by FMU

Trxn Capping(MPOS) RM [] [] [] [] [] [] Single Trxn Amt RM [] [] [] [] [] [] Daily Sales Amt RM [] [] [] [] [] [] Monthly Sales Amt
Trxn Capping(Tap & Pay) RM [] [] [] [] [] [] Single Trxn Amt RM [] [] [] [] [] [] Daily Sales Amt RM [] [] [] [] [] [] Monthly Sales Amt

Approved by FMU :

Signature _____ Name : _____
Designation : _____
Date : _____

MPOS BULK User Upload

Create User ID

Remarks :

Recommended by MPS :

Signature _____ Name : _____
Designation : _____
Date : _____

Approved/ Rejected by MPS:

Signature _____ Name : _____
Designation : _____
Date : _____

* Request to forward to **AO-TMU** before iCIMB : Termination of MID or TID and Change of Default Routing

For Internal Use (Acquiring Operations - Terminal Management Unit)

TMS setting attached Yes Initial : _____
 MPOS Deposit Report Yes Initial : _____

For Internal Use (iCIMB)

Request to release deposit Yes No If Yes, to forward to Account Posting Team
 Request to transfer deposit Yes No If Yes, to forward to Account Posting Team

Captured (in CLK) by,

Signature _____ Name : _____
Date : _____

Verified(in CLK) by,

Signature _____ Name : _____
Date : _____