

To: eBanking (By fax to 03-2715 6855 & original delivered within 24 hrs)
 ALLIANCE BANK MALAYSIA BERHAD
 36th floor, Menara Multi-Purpose
 Capital Square, 8 Jalan Munshi Abdullah
 50100 Kuala Lumpur

REGISTRATION OF DESIGNATED THIRD PARTY

Company name: _____

Telephone/Fax no.: _____

Date: _____

No.	Third party account no. <i>(with Alliance Bank only)</i>	Account holder's name	Business registration/ NRIC no.

..... Date:

Authorised Signatory(ies)
(Please affix Company Stamp & Business Reg. No.)

Name: 1. 2.

FOR BANK USE ONLY

Company key:

.....
 Attended by
 Date:

.....
 Approved by:
 Date: