CIMB *BizChannel*
Going Beyond Solutions

MEDIA RETURN FORM

INSTRUCTIONS**: **Use a separate form for each user.

User Name: _____

NRIC/ Passport No: _____

Company Name: _____

Company Registration #: _____ Company Tel No: _____

Company Address: _____

_____

Please ☑ Where applicable.

☐ **Renewal** ☐ **Revocation** ☐ **Suspension** ☐ **Reinstatement** ☐ **Security device change request**

Reason:

☐ Lost security device
☐ Security device damaged/ corrupted*
☐ Smart Card PIN blocked/ forgotten *
☐ USB Security Device PIN blocked/forgotten *
☐ Termination of user *
☐ Unauthorized use*
☐ Media changes : USB Security Device to Smart Card*
☐ Media changes : Smart Card to USB Security Device*
☐ Others (Please specify) _____

For replacement of security devices due to loss or damage beyond normal wear and tear, a charge of RM200 will apply.

Revocation/ Suspension/ Reinstatement effective date: _____

Smart Card/ USB Security Device serial number: _____

Remarks (if any):

Authorized Signatory (ies) signature:

_____ Date: _____
(Name)

_____ Date: _____
(Name)

Company's stamp:

Digicert Sdn Bhd
No. 3-20 & 3-22, Jalan 14/155B
Aked Esplanad, Bukit Jalil
57000 Kuala Lumpur
Tel: 03-8992 8888 Fax: 03-8992 8811

For office use only

AP/ RP Name: _____

Date Received: _____

AP/ RP Signature:

_____