BSN RESCHEDULING AND RESTRUCTURING REQUEST FORM **APPLICANT INFORMATION** Full Name (as per NRIC/PP): Current address: NRIC/Passport no: Tel No: **Email Address:** RESCHEDULING AND RESTRUCTURING REQUEST(S) Facility (X to select): Micro Finance Account 1: Account 2: Housing Loan/Financing Account 1: Account 2: Personal Loan/Financing Account 1: Account 2: Hire Purchase Account 1: Account 2: **REASON FOR APPLICATION** Reason (X to select): Type of Assistance (X to select): Reduction in Income Short Term (24 months) Reduction in Household Income Long Term Others (please specify): Current Salary / Income (RM): **REQUESTED BY:** I acknowledged the above details are accurate and in order. (Customer's signature) Date:

The request submitted is still subject to Bank's approval. Supporting documents required:

- □ Copy IC;
- □ Latest Salary Slip / Bank Statement; or
- □ Additional supporting documents (if required by the BSN)

Please forward complete document to r&r@bsn.com.my.