Kindly send your request to:
U Mobile Services Sdn. Bhd.
P.O. Box 10358, 50712 Kuala Lumpur.
Email to customercare@gopayz.com.my

GoPayz Service Request Form

Please fill in the following details

Cardholder Name : _____ Identity Number (NRIC/Passport) : _____

Note: Please provide a copy of your NRIC or passport (for non-Malaysians) for identification purpose.

☐ Change of Personal Details

☐ Address (Residential/Billing) : _____

_____ Postcode : _____ State : _____

☐ Mobile No. : _____ - _____

☐ Email : _____

☐ Update Passport Number

Note: Please provide a copy of your new passport (if applicable), utility bill or mobile phone bill as supporting document.

☐ Account Statement Request

Statement for the month _____ (mm/yy) to _____ (mm/yy)

Send Statement to : ☐ Residential/Billing Address ☐ Email ☐ Fax Number _____

Note: We will provide the account statement subject to the fees and charges as provided on the Product Disclosure Sheet made available at www.gopayz.com.my

☐ Card Replacement

☐ Principal Card (Type: _____)

Reasons: ☐ Non-Receipt of Card ☐ Lost/Stolen Card ☐ Fraudulent transaction ☐ Damaged Card
☐ Other Reasons (please specify) _____

☐ Change Name on Card ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Note: (i) For lost or stolen card, please provide a copy of police report. (ii) The replacement card will be provided subject to fees and charges applicable as provided on the Product Disclosure Sheet made available at www.gopayz.com.my

☐ Card Cancellation

☐ Principal Card (Type: _____)

Reasons: ☐ Too Many Cards ☐ Card Features Not Attractive ☐ No Usage ☐ Other Reasons (please specify)

☐ Account Cancellation

Reasons: ☐ High Fees ☐ No Usage ☐ Other Reason (please specify) _____

Please transfer any of my Wallet Account Balance from GoPayz Account to my local bank account below:

Bank Name : _____

Bank Account Name : _____

Bank Account Number : _____

Note: We want to ensure your refund is remitted to the correct local bank account. For verification purposes, please attach a copy of your bank statement / bank passbook (first page only) to support your refund application. All refunds can only be paid to the GoPayz Card Principal Cardholder's bank account; no payments to 3rd party accounts are allowed.

☐ Other Requests (please specify)

_____

_____

Cardholder's Signature	For internal use only	
Declaration – I declare that all the information provided above is true, correct and complete.		
_____ _____ Signature Date	_____ Approved by: (Name, date, signature)	_____ Processing Officer: (Name, date, signature)