

Fill out this form and fax to (02) 755-5039.

## HSBC's AutoCharge Enrollment Form

### IMPORTANT REMINDER:

Please continue to settle your bill/s through other means until you have confirmation that your enrollment has been approved. You may also call (02) 85-800 to confirm your enrollment status. Allow 5 – 7 banking days for processing.

Cardholder's Name:

<input type="text"/>	<input type="text"/>	<input type="text"/>
FIRST NAME	MIDDLE NAME	LAST NAME

HSBC Credit Card Number:

 -  -  - 

Card Expiry (MM-YY):

 - 

Date of Birth (MM-DD-YYYY):

 -  - 

Mother's Full Maiden Name:

Contact Information:

DAYTIME PHONE

EMAIL ADDRESS

MOBILE PHONE

FAX NUMBER

Partner Utility Companies:

PLDT • Globe • Innove • SkyCable • ZPDee • Sun Cellular • Cablelink Internet • Parañaque Cable • Bacoor Cable • Pasay Cable • Imus Cable • Pateros Cable • Las Piñas Cable • Taguig Cable • Muntinlupa Cable

Utility Account/s to be enrolled in HSBC's AutoCharge:

Utility Company:	<input type="text"/>
Subscriber Name:	<input type="text"/>
Account Number:	<input type="text"/>

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Subscriber Name:	<input type="text"/>
Account Number:	<input type="text"/>

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Subscriber Name:	<input type="text"/>
Account Number:	<input type="text"/>

Utility Company:	<input type="text"/>
Subscriber Name:	<input type="text"/>
Account Number:	<input type="text"/>

Declaration and Signature:

I hereby declare that the information contained herein is true and accurate and undertake to inform HSBC and the utility company of any change thereto. I understand that my application for enrollment in HSBC's AutoCharge is subject to approval by HSBC and the utility company. Should my application be approved, I hereby authorize the utility company to cause HSBC to charge the monthly utility bills due on the above-listed accounts to my above HSBC credit card. By signing below, I confirm that I have read, understood, and agreed to be bound by the Terms and Conditions governing HSBC's AutoCharge.

Cardholder's Signature: \_\_\_\_\_

Date: \_\_\_\_\_