

REQUEST FOR CANCELLATION OF AUTOMATIC DEBIT ARRANGEMENT (Credit Card / ADA)

_____ Date

Citra Metro Manila Tollways Corporation
CMMTC, 3/F Toll Operations Bldg., Doña Soledad Ave.
Brgy. Don Bosco, Parañaque City

This is to request from **Citra Metro Manila Tollways Corporation (“CMMTC”)** and it’s **Authorized Credit Card Bank Host (“Provider”)** through **RFID Account Management**, to cancel my Credit Card for the replenishment of my RFID Account effective _____.

CREDIT CARD DETAILS

Card Holder’s Name : _____
Credit Card No. : _____ - _____ - _____ - _____
Card Type : MasterCard Visa JCB Amex
Issuing Bank : _____
Expiry Date (MM/YY) : _____

RFID ACCOUNT DETAILS

Account Name : _____
Account No. : _____
Email Address : _____
Landline No. : _____
Mobile No. : _____

CUSTOMER'S PRINTED NAME & SIGNATURE

To be filled up by RFID Account Management Group

Customer Care (Front-Office)

Date Received : _____
Received / Verified by : _____
Station / Location : _____
Signature: : _____

Customer Care (Back-Office)

Date Received : _____
Date Processed by : _____
Processed By : _____
Station Location : _____
Signature : _____