



TSC

บริการธุรกิจตอบรับ

ใบอนุญาตเลขที่ ปน.(น)/723 ปทจ. สามเสนใน
ถ้าหากส่งไปประเทศไม่ต้องผูกตราไปรษณียากร

บริษัท อเมริกัน เอ็กซ์เพรส (ไทย) จำกัด
ตู้ ปณ. 210 ปทจ.สามเสนใน
กรุงเทพมหานคร 10400

The Ultra - Convenient Autopay Service

Autopay Service Enrollment Form
for American Express Card members



Autopay Service

Choose to pay your monthly bills such as landline telephone, mobile phone and internet bills with American Express Autopay service, the convenient and hassle-free way to manage your bills through your American Express Card account, and to earn you more Membership Rewards points*.

*Except the THAI American Express Platinum Credit Card which will earn THAI American Express Platinum points for Royal Orchid Plus mile redemption under the applicable Terms and Conditions.



No additional fee applied

A list of service providers participating in the Autopay Service

Telephone

TOT CAT

Mobile Phone

AIS DTAC

Internet

AIS Fibre 3BB

Terms and Conditions for Autopay Service

1. Simply choose the item(s) you would like to be directly billed to your American Express Card and/or American Express Credit Card Account and return this postage prepaid form to American Express (including the submission via electronic means). **For your TOT or CAT phone bill to be directly billed, please enclose a copy of the TOT or CAT phone bill/receipt of phone payment along with the Autopay form.**
2. By signing this Autopay Service Enrollment form (whether it is the wet signature, electronic signature or a copy of original signature delivered via electronic means), you authorize your nominated Establishment(s) to charge your monthly fee directly to your American Express Card and/or American Express Credit Card Account until American Express receives notification of the cancellation of such Autopay Service from your nominated establishments. **For Cancellation of Telephone Autopay services, please send a cancellation letter to American Express at least 2 months in advance.**
3. Successful applications for Autopay are typically approved and become effective within 2 months from the date American Express receives your enrollment form.
4. Any monthly charges incurred with concerned Establishment(s) prior to enrolling in the Autopay Service must be settled by existing means, until the concerned Establishment(s) provides a message on their statement advising that your monthly fee will be paid **via Autopay Service** on your American Express Card and/or American Express Credit Card Account. In the case of setting your TOT telephone bill through American Express, if approved, TOT bill will state, "Telephone fee will be directly debited from bank account/Card Account" and the receipt will reflect your card and/or credit card number.
5. In case where American Express rejects your application for any/all Establishment(s), or in the case where the Card has been suspended or canceled, you will have to pay the Establishment(s) directly, to prevent the Establishment(s) Services being suspended.
6. American Express shall not be responsible for the consequences of non-payment by you of the Establishment(s) charges (i) prior to your having received confirmation from the Establishment that your monthly fee will be paid via Autopay Service on your American Express and/or American Express Credit Card Account, or (ii) in the event your card is suspended or canceled.
7. In the event that your American Express Card account/Card number is changed whether due to the Card conversion/replacement or for any other reason, you will need to re-apply for the Autopay Service by using the information of the latest Card account/Card number.
8. Please contact the Establishment(s) directly for any inquiry regarding the monthly billing statement, receipt, or detail of monthly fees from the Establishment(s).

Agent code :

American Express Autopay Service Enrollment Form

I hereby authorize the Establishment(s) noted below to directly charge monthly fees and airtime charges on the below marked services to my American Express Card and/or American Express Credit Card Account, and irrespective of whether the services concerned are purchased in my name or the names of third parties. (Please insert **X** in the in front of your selected Establishment)

Telephone*

(Please enclose a photocopy of your telephone bill with this form)

TOT

STD Area Code

Tel. No.

1.

Account No.

Registered Name _____

* In the case of additional telephone number, it is permissible to make a copy of this form.

CAT

STD Area Code

Tel. No.

1.

Contract No.**

Registered Name _____

- * If you are a Juristic Person, Civil Servant or State Enterprise Employee, please call Card member Service for the power of attorney. Enrollment will not be effective until American Express receives the executed power of attorney.
- ** Please insert "0" in front of your contract number, where your contract number has less than 10 digits.

If you are a **Juristic Person, Civil Servant, or State Enterprise Employee**, please fill in the information below.

I hereby agree to appoint and authorize **National Telecom Public Company Limited** to become my withholding tax agent with the details prescribed in the separated power of attorney, containing the below information.

Tax ID Number:

Juristic Person Number:

Signature: _____
(_____)

Date: (D/M/Y) ____ / ____ / ____

Sample form for payment of telephone bills through American Express Autopay Service

Sample

Kind of Telephone	Your Tel. Number	STD Area Code	Tel. No.
Bangkok area code	0 0398 7167	<input type="text"/> 0 <input type="text"/> 0 <input type="text"/> 2	<input type="text"/> 3 <input type="text"/> 9 <input type="text"/> 8 <input type="text"/> 7 <input type="text"/> 1 <input type="text"/> 6 <input type="text"/> 7
Provinces with 6-digit	0 5663 1122	<input type="text"/> 0 <input type="text"/> 5 <input type="text"/> 6	<input type="text"/> 0 <input type="text"/> 6 <input type="text"/> 3 <input type="text"/> 1 <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 2
470 Mobile phone	081 212 9970	<input type="text"/> 0 <input type="text"/> 8 <input type="text"/> 1	<input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 2 <input type="text"/> 9 <input type="text"/> 9 <input type="text"/> 7 <input type="text"/> 0

Remarks

- For telephones in Bangkok: Please insert "002" in area code
- For telephones in other provinces: Please insert "0" in front of your 6-digit telephone number
- For 470 mobile phones: Please insert "2" after the "01" area code for the telephone number
Please replace the first digit with the number "0"



Account Number

00114063359

Mobile Phone

AIS

1. Billing Account No.
Mobile Phone No.
Registered Name _____

DTAC

Due to information system limitations, DTAC SMEs numbers cannot be charged utilizing the Autopay Service.

1. Billing Account No.
Mobile Phone No.
Registered Name _____

DTAC TriNet

Due to information system limitations, DTAC SMEs numbers cannot be charged utilizing the Autopay Service.

1. Billing Account No.
Mobile Phone No.
Registered Name _____

* Only a mobile telephone number registered as an individual user is eligible for the Autopay Service.

Remark : We are unable to enroll any Mobile Phone numbers start with 09 (DTAC 2G) at this moment.

Internet

AIS Fibre

Registered Name _____
Customer No.
Internet No.
Phone number of registered name _____
If you are a Juristic Person, Civil Servant, or State Enterprise Employee, please fill in the information below.
I hereby agree to appoint and authorize Advanced Wireless Network Co., Ltd. to become my withholding tax agent.
Tax ID Number: _____
Juristic Person Number: _____

3BB

Registered Name _____
Account No.
Service No.
Phone number of registered name _____
If you are a Juristic Person, Civil Servant, or State Enterprise Employee, please fill in the information below.
I hereby agree to appoint and authorize TRIPLE T INTERNET CO.,LTD. to become my withholding tax agent.
Tax ID Number: _____
Juristic Person Number: _____

Card member's Information

Card member's name in English (as appears on the Card)

American Express Card and/or Credit Card Account Number

Expiry Date ____ / ____ / ____
Card member's Signature (as appears on the Card) _____
Date (D/M/Y) ____ / ____ / ____
If you wish to receive product and service offers from us via e-mail, please fill in your e-mail address below
E-mail: _____