

APPLICATION FORM FOR INTERBANK GIRO

Oversea-Chinese Banking Corporation Limited

PART 1: FOR APPLICANT'S COMP	LETION (fill in the spaces indicated with ✓)
Date: ✓	Name of Billing Organisation ("BO"): ✓
To : Name of Financial Institution ✓	Billing Organisation's Customer's Name: ✓
Branch: ✓	Billing Organisation's Customer's Reference No: ✓
me/us a fee for this. You may also at your disc account and impose charges accordingly. (c) This authorization will remain in force until terming you or upon receipt of my/our written revocation	ion if my/our account does not have sufficient funds and charge cretion allow the debit even if this results in an overdraft on the nated by your written notice sent to my/our address last known to
are made thereafter. My/Our Name(s): ✓	My/Our Contact (Tel/Fax) Number(s): ✓
My/Our Account Number(s): ✓	My/Our Company's Stamp/Signature(s)/Thumbprint(s)*: ✓
	(As in Financial Institution's records)
PART 2: FOR BILLING	ORGANISATION'S COMPLETION
Bank Branch Billing Organisation's Account	t No. Billing Organisation's Customer's Ref No.
Bank Branch Account No. To Be Debite	d
PART 3: FOR FINANCI	AL INSTITIUTION'S COMPLETION
To: Billing Organisation This application is hereby REJECTED (please tick) for the fo	llowing reason(s):
□ Signature/Thumbprint# differs from Financial Institution	n's records Wrong account number
□ Signature/Thumbprint# incomplete/unclear# □ Account operated by signature/thumbprint#	□ Amendments not countersigned by customer □ Others:
Name of Approving Officer Author	prized Signature Date

APP/BR/182 Co. Reg No.: 193200032W

Please delete where inapplicable

 $\ensuremath{^{\star}}$ For thumbprints, please go to the branch with your identification