

APPLICATION FOR INTERBANK GIRO

PART 1 : FOR APPLICANT'S COMPLETION

*(Fill in the blanks indicated with *)*

Date :

*

Name of Billing Organisation ("BO") :

Certis CISCO Security Pte Ltd

Bank's Name :

*

BO's **First** Licensee's Name :

*

Bank's Branch :

*

BO's **First** Licensee's NRIC / Passport Number :

*

Bank's Address :

*

BO's **First** Licensee's Reference Number :

1. Complete Part 1 of this form and return it to Certis CISCO Security Pte Ltd - Finance Dept
Certis CISCO Centre, 20 Jalan Afifi, Singapore 409179.
2. Please ensure that you sign the form in the same way that you would sign on the account with your Bank/Finance Company Account.
3. I/We hereby instruct you to process the BO's instructions to debit my/our account.
4. You are entitled to reject the BO's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
5. This authorisation will remain in force until terminated by your written notice sent to my/our address last known you or upon receipt of my/our written revocation through the BO.

My/Our Name(s) :

*

My/Our Contact (Home/Mobile) Number(s) :

*

My/Our Bank Account Number :

*

My/Our Company Stamp/Signature(s)/Thumbprint(s)* :
(As in Financial Institution's records)

My/Our E-mail Address :

*

*

**For Thumbprints, please go to the branch with your identification*

PART 2 : FOR BILLING ORGANISATION'S COMPLETION

Financial Inst	Branch	Billing Organisation's Account No.														
7	1	7	1	0	0	1	0	0	1	0	0	1	2	6	2	2

Billing Organisation's Customer Reference No.											

Financial Inst	Branch	Account No. To Be Debited														

PART 3 : FOR FINANCIAL INSTITUTION'S COMPLETION

To : Billing Organisation

This Application is hereby REJECTED (please tick) for the following reason(s) :

- | | |
|---|---|
| <input type="checkbox"/> Signature/Thumbprint# differs from Financial Institution's records | <input type="checkbox"/> Wrong account number |
| <input type="checkbox"/> Signature/Thumbprint# incomplete/unclear# | <input type="checkbox"/> Amendments not countersigned by customer |
| <input type="checkbox"/> Account operated by signature/Thumbprint# | <input type="checkbox"/> Others : _____ |

Name of Approving Officer

Authorised Signature

Date

#Please delete where inapplicable.