

BATCH NUMBER

**APPLICATION FORM FOR INTERBANK GIRO
(AUTO FINANCING)**

PART 1: APPLICANT'S COMPLETION (fill in the spaces indicated with ✓)


Date: _____ Name of Billing Organisation ("BO"): _____
 ✓ _____ ✓ **[OCBC Bank]**

To: Name of Financial Institution _____ Billing Organisation's Customer's Name: _____
 ✓ _____ ✓ _____

Branch: _____ Billing Organisation's Customer's Reference Number: _____
 ✓ _____ ✓ _____

- (a) I/We hereby instruct you to process the BO's instructions to debit my/our account.
- (b) 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.
- (c) This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through the BO.

My/Our Name(s): _____ MY/Our Contact (Tel/Fax) Number(s): _____
 ✓ _____ ✓ _____

My/Our Account Number: _____ My/Our Company Stamp/Signature(s)/Thumbprints(s)*: _____
 ✓ _____ ✓ _____ 
 (As in Financial Institution's records)
 * For thumbprints, please go to the branch with your identification

PART 2: FOR BILLING ORGANISATION'S COMPLETION

Bank	Branch	Organisation's Account No.
7 3 3 9	5 0 1	9 6 7 2 1 0 0 0 1

Billing Organisation's Customer Ref No.

Bank	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