

ORIGINATING ACCOUNT'S DETAILS

Account Name:	Account No.:
Contact No.:	Contact Person:

TYPE OF REQUEST "I/we acknowledge that my/our request shall be undertaken on a best endeavours basis"

Receiving Bank	:	
Receiving Account No.	:	
Receiving Account Name	:	
Amount Paid	:	
Value Date	:	

PURPOSE OF RECALL (PLEASE TICK)

- ☐ Wrong Account
- ☐ Wrong Payment Made To Account Holder
- ☐ Duplicate Payment
- ☐ Amount Overpaid : _____
- ☐ Others (please specify) : _____

SPECIAL INSTRUCTION

Please credit the amount recalled to the following account:

- ☐ Account No. : _____

TERMS & CONDITIONS OF REQUEST

I/we acknowledge that my/our request shall be undertaken on a best endeavours basis. In consideration of your agreeing to my/our request, I/we hereby undertake to indemnify you and keep you indemnified at all times, against all actions, proceedings, claims, demands, liabilities, losses, damages, costs and expenses (including all legal fees on a full indemnity basis) whatsoever incurred by you in connection with the above. "You" shall mean OCBC Bank, any of its officers, employees, agents, service provider and professional advisers.

However, if there is any dispute (or in the event the payee makes a demand from you in connection with the amount recalled), I/we undertake to repay the amount to you within 24 hours of your demand on me/us.

This request shall be governed by and construed in all respects in accordance with the laws of the Republic of Singapore and I/we hereby agree to submit to the non-exclusive jurisdiction of the courts of Singapore. A person who is not a party to this request has no rights under the Contracts (Rights of Third Parties) Act (Cap. 53B) to enforce any term of the same.

Authorised Signature(s) & Company Stamp (if applicable)

Date

FOR BANK USE

Signature Verified By:	Processed By:	Date Processed:
------------------------	---------------	-----------------