

## APPLICATION FORM FOR INTERBANK GIRO

Please mail completed form to: OVERSEA-CHINESE BANKING CORPORATION LIMITED, Account Services, Bras Basah Post Office, Locked Bag Service No.8, Singapore 911886

PART 1: FOR APPLICAN	T'S COMPLETION	l (fill in	the bo	oxes	indi	cate	d w	ith	<b>√</b> )								
Date:		Name of Billing Organisation ("BO"):  OVERSEA-CHINESE BANKING CORPORATION LIMITED CREDIT CARDS															
		Cardmember's Name (Please use BLOCK letters):															
To: Name of Financial Institution and Branch:																	
		1														_	
My/Our Account Number to be debited:		✓ VISA/MasterCard/Robinson Card Number												ı			
<u>/</u>														<u> </u>			
My/Our Names and NRIC No.(s) with Financial Institution:		✓ VIS	A/Mas	terCa	ard/R	obins	son C	Card	Numl	ber						Í	
									[	[				<u> </u>			
Payment Instruction (Please ✓): ☐ Minimum Payment ☐ Instruction (Please ✓): ☐ Minimum Payment ☐ Instruction (a) I/We hereby instruct you to process the BO's instructions to debit my/or (b) You are entitled to reject the BO's debit instruction if my/our account different this results in an overdraft on the account and impose charges accordingly (c) This Authorisation will remain in force until terminated by your written in the control of	oes not have suffici																
My/Our Company Stamp/Signature(s)/Thumbprint(s)*:		My/O	ır Cont	tact (	Tel/F	ax) N	lumb	er(s)	ı								
,		,															
(As in Financial Institution's records)	_	<u> </u>														_	
PART 2: FO	R BILLING ORGA	NISATIC	N'S C	OMF	PLET	ION											
Bank Branch Billing Organisation's Account No.		VISA/I	/laster(	Card/	'Robii	nson	Card	d DD	A Re	feren	ce No	0.					
7 3 3 9 5 0 1 9 5 0 2 8 1 0 0 1					1												
Bank Branch Account No. to be debited		VISA/ľ	/laster(	Card/	'Robii	nson	Card	d DD	A Re	feren	ce No	0.					
PART 3: FO	R FINANCIAL INS	STITUTIO	N'S C	:OMF	PLET	ION											
To: Billing Organisation This Application is hereby REJECTED (please tick) for the following reason				-51111	1												
☐ Signature/thumbprint# differs from Financial Institution's records	─ Wrong account	g account number															
Signature/thumbprint# incomplete/unclear#	Amendments	ents not countersigned by customer															
Account operated by signature/thumbprint#	Others:																
Name of Approving Officer	Authorised Signatu	ure										Da	te.				

#Please delete where inapplicable.

<sup>\*</sup>For thumbprint, please go to the branch with your identification card.