UNITED OVERSEAS BANK LIMITED
FAR EASTERN BANK LIMITED

APPLICATION FORM FOR INTERBANK GIRO

(Please complete PART I of this form and return to the Billing Organisation.)

PART 1 : FOR APPLICANT'S COMPLETION (FILL IN THE SPACES INDICATED WITH ✓)

Date :

✓ _____
To : Name of Bank / Finance Company :

✓ _____
Branch :

✓ _____

Name of Billing Organisation ("BO") :

✓ **UNITED OVERSEAS BANK LTD**
Customer's Name :

✓ _____
Customer's Loan Account 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 Account Number :

✓ _____

My/Our Contact (Tel/Fax) Number(s) :

✓ Mobile : _____ Home : _____
My/Our Company Stamp/Signature(s)/Thumbprint(s)*:

✓ ☛ _____
(As in Bank/Finance Company's records)
*For thumbprints, please go to the branch with your identificaton.

PART 2 : FOR BILLING ORGANISATION'S COMPLETION

Bank	Branch	Billing Organisation's Account No.
7 3 7 5	0 0 1	1 0 1 3 1 8 1 0 7 7

Billing Organisation's Customer Ref No.

Bank	Branch	Account No. To Be Debited

PART 3 : FOR BANK / FINANCE COMPANY'S COMPLETION

To: The Manager (Name & Address of Billing Organisaton)
United Overseas Bank Ltd
Credit Processing – Consumer A/cs
1 Tampines Central 1
#03-01 UOB Tampines Centre
Singapore 529539

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

❒ Signature/Thumbprint# differs from Bank/Finance Co's records
❒ Signature/Thumbprint# incomplete/unclear#
❒ Account operated by signature/thumbprint#
❒ Wrong account number
❒ Amendments not countersigned by customer
❒ Others: _____

_____ Name of Approving Officer

_____ Authorised Signature

_____ Date

Please delete where inapplicable