Telcom United (S) Pte Ltd
No 3 New Industrial Road. #05-01D Kimly Building. Singapore 536197
Tel: 6343-1491 & 6343-1751 Fax: 6343-1892
Email: sales@telcomunited.com GST Reg No: 20-0007047-Z

APPLICATION FORM FOR INTERBANK GIRO

PART 1: FOR APPLICANT'S COMPLETION

Date: _____

Billing Organization:
Telcom United (S) Pte Ltd

To: Name of Financial Institution/Bank:

_____

Customer's Name:

_____

Branch:

_____

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)/Thumbprint(S)*

_____
(As in Financial Institution/Bank's records)

PART 2: FOR BILLING ORGANISATION'S COMPLETION

Bank	Branch	Telcom United (S) Pte Ltd's A/C No.	Customer Reference
7 1 7 1	0 2 7	0 2 7 9 0 0 0 3 3 3	

Bank	Branch	Customer's A/C No. to be debited.

PART 3: FOR FINANCIAL INSTITUTION'S COMPLETION

To:

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

☐ Signature/Thumbprint# differs from Financial Institution'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

* For thumbprints, please go to the branch with your identification.

Please delete where inapplicable