

APPLICATION FORM FOR INTERBANK GIRO

- Please complete all fields in PART 1 and return the form to UOB Cards & Payment Products (Robinson Road P.O. Box 1688 Singapore 903338).
- Please ensure that any amendments made are countersigned.
 We would require 2.5.6 weeks for processing hence, please counterside the second secon
- is to sattle your outstanding hills until your Card statement indicates that GIPO is affected

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PART 1: FOR UOB CA	ARDMEMBER'S COMPLETION	
fo: Name of Financial Institution and Branch:	Date:	
Name of Billing Organisation ("BO"): UOB Card Centre		
JOB Cardmember's Reference No.:	1	
UOB VISA Card / MasterCard / JCB Card No.	Name of UOB Cardmember(s)	NRIC / Passport No.
Payment Instructions (Please ✓. If left unticked, the	Full Payment Minimum Payment	
ull payment option will be automatically chosen). a) I/We hereby instruct you to process the BO's instructions t	o debit my/our account.	
b) You are entitled to reject the BO's debit instruction if my/ou	r account does not have sufficient funds and	
You may also at your discretion allow the debit even if this c) This authorisation will remain in force until terminated by		1 0 0,
receipt of my/our written revocation through the BO.	your written notice sent to myour address	
My / Our Names with Financial Institution:	My / Our Company Stamp / Signatu	re(s) / Thumbprint(s)*:
My / Our Bank Account Number to be debited:	-	
My / Our Contact Number(s):	-	
	(As in Bank / Financial Institution's Records) * For thumbprints, please go to the branch with your NRIC / passport)	
PART 2: FOR BILLING (ORGANISATION'S COMPLETION	
Bank Branch UOB Card Centre Bank A/c No	Billing Organisation's Cu	stomer Ref No
7 3 7 5 0 0 1 1 0 1 3 3 5 3 9 5 1		
Bank Branch Account No to be Debited		
Payment Instructions	Minimum Payment	
PART 3: FOR FINANCIA	L INSTITUTION'S COMPLETION	
	This Application is hereby REJECTED becaus	
	Signature / thumbprint# differs from Financial Institution's records	
To: UNITED OVERSEAS BANK LTD	Signature / thumbprint [#] is incomplete / unclear [#]	
UOB Cards & Payment Products Robinson Road P.O. Box 1688	Account operated by signature / thumbprint#	

Wrong account number

Others:

Authorised Signature

Amendments not countersigned by customer

Date:

Singapore 903338

CC-180 (R8.06)

Name of Approving Officer: