

Application for Deposits Transfer (InterBank GIRO Collection) Arrangement

PART 1: FOR APPLICANT'S COMPLETION												
Date	UOB account number to be credited											
Bank & branch with which my/our debiting account is maintained	UOB crediting account name											
My/Our debiting account number with the Bank	UOB crediting account holder's NRIC/Passport number											
My/Our debiting account name as in the Bank's record	My/Our contact number(s)											
Amount to be deducted monthly <input type="checkbox"/> S\$500 <input type="checkbox"/> S\$1,000 <input type="checkbox"/> Others: S\$_____												
Deduction date for each month: _____												
a) I/We hereby instruct you to process United Overseas Bank Limited's instruction to debit my/our account. b) You are entitled to reject United Overseas Bank Limited'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 authorization 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 United Overseas Bank Limited. d) I/We understand and agree that my/our UOB account will be credited 1 working day after the deduction date. If the deduction date is a non working day, the deduction will be done the prior working day. e) I/We understand that this GIRO application will be ready approximately 14 working days after my/our submission of our authorization, which has to be verified by the financial institution where my/our account is maintained. f) Other terms & conditions for promotion apply.												
My/Our Signature(s)/ Thumbprint(s)* _____ (As in debiting account Bank's records) * For thumbprints, pls visit the branch of the financial institution/ bank with which the debiting account is maintained.												
PART 2: FOR UOB'S COMPLETION												
<table border="1"> <thead> <tr> <th>Bank</th> <th>Branch</th> <th>UOB Crediting Account No.</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Bank	Branch	UOB Crediting Account No.				<table border="1"> <thead> <tr> <th colspan="2">Reference Number</th> </tr> </thead> <tbody> <tr> <td>S</td> <td>O F C</td> </tr> </tbody> </table>	Reference Number		S	O F C	
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Staff Name:												
Deposit amount: _____												
PART 3: FOR FINANCIAL INSTITUTION/ BANK'S COMPLETION												
To: United Overseas Bank Limited, Channel Support Centre, Robinson Road, P O Box 1282, Singapore 902532												
This Application is hereby REJECTED (Please tick) for the following reason(s):												
<input type="checkbox"/> Signature/ Thumbprint [^] differs from bank's records <input type="checkbox"/> Wrong account number <input type="checkbox"/> Signature/ Thumbprint [^] incomplete/ unclear <input type="checkbox"/> Amendments not countersigned by customer(s) <input type="checkbox"/> Account operated by signature/ thumbprint <input type="checkbox"/> Others: _____ [^] please delete where applicable												
_____ Name of Approving Officer	_____ Authorised Signature											
	_____ Date											