



# GIRO APPLICATION FORM

## APPLICATION FORM FOR INTERBANK GIRO

### PART 1: FOR APPLICANT'S COMPLETION (fill in the spaces indicated with ✓)

Date:

Name of Billing Organisation ("BO"):

✓ \_\_\_\_\_

✓ LPM AL-MUTTAQIN

To: Name of Financial Institution

Billing Organisation's Customer's Name:

✓ \_\_\_\_\_

✓ \_\_\_\_\_

Branch:

Billing Organisation's 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.

Yes, I am pleased to make a monthly contribution of the following amount: (please ✓)

☐ \$5

☐ \$10

☐ \$20

☐ \$30

☐ \$50

\$

**Other amounts (please indicate)**

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's records)

### PART 2: FOR BILLING ORGANISATION'S COMPLETION

Bank				Branch			Billing Organisation's Account Number									
7	3	3	9	5	9	1	1	1	8	6	3	3	-	0	0	1

NRIC Number or Passport Number							

Bank				Branch			Account Number To Be Debit									

### PART 3: FOR FINANCIAL INSTITUTION'S COMPLETION

To: Billing Organisation

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

☐ Signature/Thumbprint# differs from Financial Institution's records

☐ Wrong account number

☐ Signature/Thumbprint# incomplete/unclear#

☐ Amendments not countersigned by customer

☐ Account operated by signature/thumbprint#

☐ Others: \_\_\_\_\_

\_\_\_\_\_  
Name of Approving Officer

\_\_\_\_\_  
Authorised Signature

\_\_\_\_\_  
Date

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

# Please delete where inapplicable