Standard **S**Chartered



APPLICATION FOR INTERBANK GIRO

PART 1 : F	OR APPLICANT'S COMPLE	FION (Fill in the spaces indicated wit	n ✔)
Date :		Name of Billing Organisation ("BO"):	
✓		(Pre-printed by Billing Organisation) Asia Access Telecom Pte Ltd	
		Billing Organisation Member's Name: (to be entered by AAT before mailing)	
✓			
Branch :		Billing Organisation member's Reference Number : (to be entered by AAT before mailing)	
✓			
also at your discretion allow the del	debit instruction if my/our accound bit even if this results in an overd pree until terminated by your writt	y/our account. nt does not have sufficient funds and cha raft on the account and impose charges sen notice sent to my/our address last kn	accordingly.
My/Our Name(s) :		My/Our Contact (Tel/Fax) Number(s):	
		1	
✓			
My/Our Account Number : My/Our Company Stamp/Signature(s)/Thumbprint(s)* : ✓			-
		(As in Financial Ins	titution's records)
Р	PART 2 : FOR BILLING ORGA	NISATION'S COMPLETION	
Bank Branch Billing Organisation's Account No.			
7 1 4 4 0 0 1 0 1	0 1 3 9 6 7 6	7 Billing Organisatio	n's Member's Reference Number.
Bank Branch Account N	No. To be Debited		
PAR	RT 3 : FOR FINANCIAL INST	ITUTION'S COMPLETION	
To : Billing Organisation			
This Application is hereby REJECTED (pleas π Signature/Thumbprint# differs from Finan π Signature/Thumbprint# incomplete/unclea π Account operated by signature/thumbprint	ucial Institution's records ur#): π Wrong account number π Amendments not countersign π Others:	•
Name of Approving Officer		Authorised Signature	Date
* For thumbprints, please go to the branch with your identification. # Please delete where inapplicable.			