

GIRO APPLICATION FORM

PART 1: FOR APPLICANT'S COMPLETION

Date:

Name of Billing Organisation ("BO")

BEAM STORAGE PTE TLD

To: My/Our Bank ("Bank")

Billing Organisation's Customer Reference No.

- a) I/We hereby instruct the Bank to process the BO's instructions to debit my/our account.
b) The Bank is entitled to reject the BO's debit instruction if my/our account does not have sufficient funds and charge me/our a fee for this. The Bank may also at its 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
1) the Bank's written notice sent to my/our address last known to the Bank;
2) upon the Bank's receipt of my/our written revocation; or
3) upon the Bank's receipt of the notice of expiry from the BO.

My/Our Name(s):

My/Our Signature(s)/Thumbprint(s)* / Company
Stamp (as in bank's record):

My/Our Account Number:

My/Our Contact Number(s):

PART 2: FOR BILLING ORGANISATION'S COMPLETION

SWIFT BIC	Billing Organisation's Account Number
DBSSSGSG	0721001519

Billing Organisation's Customer Ref No.

SWIFT BIC	Account No. To Be Debited

PART 3: FOR FINANCIAL INSTITUTION'S COMPLETION

To: BILLING ORGANISATION

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

- | | |
|--|---|
| <input type="checkbox"/> Signature/Thumbprint* differs from Bank records | <input type="checkbox"/> Wrong account number |
| <input type="checkbox"/> Signature/thumbprint# incomplete/unclear# | <input type="checkbox"/> Amendments not countersigned by customer |
| <input type="checkbox"/> Account operated by signature/thumbprint# | <input type="checkbox"/> Others: _____ |

Name of Approving Officer

Authorised Signature

Date

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

Please delete where inapplicable.