

APPLICATION FORM FOR INTERBANK GIRO

(Please complete Part 1 of this form and return to Phillip Securities Pte Ltd. Incomplete forms may not be processed)

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

Date:

√ _____

To: Name of Bank: (DBS / POSB / UOB / OCBC)

Branch:

√ _____

Name of Billing Organisation ("BO"):

PHILLIP SECURITIES PTE LTD

Billing Organisation's Customer's Name:

√ Client Name: _____

√ Trading Account No:

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(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.

My/Our Name(s) as in Bank's record

√ _____

My/Our Account Number:

√ _____

My/Our Contact (Tel/Fax) Number(s):

√ _____

My/Our Company Stamp/Signature(s)/Thumbprint(s)*:

√ _____

(as in bank's records)

PART 2: FOR BILLING ORGANISATION'S COMPLETION

Bank	Branch	Billing Organisation's Account Number
7171	048	0480059880

Billing Organisation's Ref Number

Bank	Branch	Account Number To Be Debited

PART 3: FOR BANK'S COMPLETION

To: Billing Organisation

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

- ☐ Signature/Thumbprint# differs from Bank's records
☐ Signature/Thumbprint# incomplete/unclear#
☐ Account operated by signature/thumbprint#

- ☐ Wrong account number
☐ Amendments not countersigned by customer
☐ Other reason(s):

Name of Approving Officer

Authorised Signature

Date

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

Please delete where inapplicable.