

# APPLICATION FOR UOB INTERBANK GIRO

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

Date :  ✓ _____  To :  _____ <b>United Overseas Bank Limited</b> _____  Branch :  ✓ _____	Name of Billing Organisation ("BO") :  <b>DMG &amp; PARTNERS SECURITIES PTE LTD</b> _____  Billing Organisation's Customer's Name : (My Name)  ✓ _____  Billing Organisation's Customer's Reference Number : (My Trading Account Number)  ✓ _____
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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 Account Name(s):  ✓ _____  My/Our Account Number(s):  ✓ _____	My/Our Contact: (Tel/Fax) Number(s):  ✓ _____  My/Our Company Stamp/Signature(s)/Thumbprint(s)*:  ✓ _____ (As in UOB's records)
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## PART 2 : FOR BILLING ORGANISATION'S COMPLETION

Bank	Branch	Billing Organisation's Account No.	Billing Organisation's Customer Ref No.
7   3   7   5	0   0   1	9   0   1   3   5   4   9   2   0   2	
Bank	Branch	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's 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
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\* Please go to the branch with your identification for thumbprint(s).  
 # Please delete where inapplicable

(12/00)