



APPLICATION FORM FOR INTERBANK GIRO

This form may take you 5 minutes to fill in.
 You will need the following information to fill in the form:
 - The bank account number
 - The bank and branch code
 - The name and address of the branch

Please fill up this form so that all future payments to **Agri-Food and Veterinary Authority (AVA)** will be deducted from the bank account stated. Please contact Ms Ng Kim Choo at 6325-7696 if there is any queries.

Please fill in Part I only, and return the ENTIRE original form (fax copy not acceptable) to **Financial Controller (Attn: Ms Ng Kim Choo), AVA, 5 Maxwell Road, #03-00, Tower Block, MND Complex, Singapore 069110**

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

Date : _____

Name of Billing Organisation ("BO") :
Agri-food & Veterinary Authority

To: Name of Bank : _____

Name of Customer : _____

Branch & Address: _____

My/ Our Address: _____

- (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 Bank Account Name(s): _____

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

My/ Our Bank Account Number :												

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

(As in Bank's records)

PART 2 : FOR BILLING ORGANISATION'S COMPLETION

Bank				Branch			AVA's Bank Account No.									
7	1	7	1	0	0	1	0	0	1	0	7	2	1	0	0	3

Billing Organisation's Customer's Reference Number :												

Bank				Branch			Customer's Bank Account No.									

PART 3 : FOR BANK'S COMPLETION

To: Financial Controller, AVA, 5 Maxwell Road, #03-00, Tower Block, MND Complex, Singapore 069110

This Application is hereby **REJECTED** (please tick) for the following reasons:

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

- Wrong account number
- Amendments not countersigned by customer
- Others : _____

 Name of Approving Officer

 Authorised Signature

 Date

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

Please delete where inapplicable