UOB

Application for Giro – Loans

Please Complete All Fields * Unless Otherwise Stated

1. Deduct from

Name of Bank *

Branch *

GIRO Account Holder's Name *

GIRO Account Number *(Do not include hypens or spaces)* *

2. Pay to

Name of Billing Organisation

UNITED OVERSEAS BANK LTD

Loan Customer's Name *

Loan Customer's Account Number *(Do not include hypens or spaces)* *

Date D D M M Y Y Y Y

Contact Number

3. Authorised Signature(s) *

(a) I/We hereby instruct you to process United Overseas Bank Ltd's instructions to debit my/our account.

(b) You are entitled to reject the United Overseas Bank Ltd'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 me/our address last known to you or upon receipt of my/our written revocation through United Overseas Bank Ltd.

Giro Account Holders's Signature (s) / Thumbprint(s) / Company Stamp (As in Bank's record)

For thumbprints, please go to the branch with your identification

Loan Customer's Signature (s) / Thumbprint(s) / Company Stamp (As in Bank's record) **(**Compulsory for 3rd Party application)**

For thumbprints, please go to the branch with your identification

For United Overseas Bank Ltd's use

SWIFT BIC: U O V B S G S G X X X

Billing Organisation's account number: 3 3 0 0 0 3 1 0

Billing organisation's customer reference number

SWIFT BIC

Account number to be debited

For Financial Institution's use

To: United Overseas Bank Ltd
Retail Loan Operations Centre
1 Tampines Central 1 #03-02
UOB Tampines Centre Singapore 529539

This application is **rejected** for the following reason(s):

- ☐ Signature/Thumbprint differs from Financial Institution's records
- ☐ Signature/Thumbprint is incomplete / unclear
- ☐ Account operated by signature / thumbprint
- ☐ Wrong account number
- ☐ Amendments not countersigned by customer
- ☐ Others: _____

Name of Approving Officer

Date D D M M Y Y Y Y

Authorised Signatory

BR-185.5 (R7.23)

jy.kx.pp