

# Darul Ihsan Orphanage

APPLICATION FORM FOR INTERBANK GIRO  
PART 1: FOR APPLICANT'S COMPLETION



SERIAL NO :

Date:

To: (Name of My/Our Bank/Finance Company)

Bank Branch/Address

My/Our Name(s) (As in Bank/Finance Company's records)

Donor's Name:

My/Our Account No:

My/Our Address:

Name of Billing Organisation ('BO')

**DARUL IHSAN ORPHANAGE**

- (a) I/We hereby authorize the BO to debit a monthly amount \$5 / \$10 / \$20 / \$50 / \$100 / Other Amount: \_\_\_\_\_ from my account.
- (b) I/We hereby instruct you to process the BO's instructions to debit my/our account.
- (c) 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.
- (d) This authorization will remain in force **for 10 years** or 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 I.C. No:

My/Our Tel/Fax No:

My/Our Company Stamp/Signature(s)/Thumbprint(s)  
\*(As in bank/finance company's records)

## PART 2: FOR BILLING ORGANISATION'S COMPLETION

Bank	Branch	Account Number
7 3 6 6	0 0 3	3 8 0 0 0 9 0 0 9 0 0

Reference No.

Bank/Finance Co.	Branch	A/C No. to be Debited

Verified By  
Darul Ihsan

## PART 3: FOR BANK/FINANCE COs COMPLETION

To: **DARUL IHSAN ORPHANAGE**  
No. 5 MATTAR ROAD  
SINGAPORE 387713  
Tel: 6747 7556

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

- Signature/Thumbprint# differs from Bank/Finance Cos 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

#Please delete where inapplicable.

DO NOT STAPLE. GLUE ALL SIDES FIRMLY.