



Please read the instruction at the back of this form and complete Part 1 of this form.

PART 1: FOR APPLICANT'S COMPLETION

<table border="1"> <tr><td>Name of Billing Organisation ("BO")</td></tr> <tr><td>Hwa Chong Institution</td></tr> <tr><td>Date</td></tr> <tr><td> </td></tr> <tr><td>To: Name of Bank</td></tr> <tr><td> </td></tr> </table>	Name of Billing Organisation ("BO")	Hwa Chong Institution	Date		To: Name of Bank		√	<table border="1"> <tr><td>Name of Student</td></tr> <tr><td> </td></tr> <tr><td>Student's NRIC/Fin Number</td></tr> <tr><td> </td></tr> </table>	Name of Student		Student's NRIC/Fin Number		√
Name of Billing Organisation ("BO")													
Hwa Chong Institution													
Date													
To: Name of Bank													
Name of Student													
Student's NRIC/Fin Number													

- (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 so doing. 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.

<table border="1"> <tr><td>Name(s) of Account Holder(s)</td></tr> <tr><td> </td></tr> <tr><td>Bank Account Number</td></tr> <tr><td> </td></tr> <tr><td>Account Holder's Contact Number</td></tr> <tr><td> </td></tr> </table>	Name(s) of Account Holder(s)		Bank Account Number		Account Holder's Contact Number		√	<table border="1"> <tr><td>Signature(s)/*Thumbprint(s)/Company Stamp</td></tr> <tr><td><i>*For thumbprint(s), please take this form and your identification to any branch of your bank for verification.</i></td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td style="text-align: center;">_____ (As in Bank's records)</td></tr> </table>	Signature(s)/*Thumbprint(s)/Company Stamp	<i>*For thumbprint(s), please take this form and your identification to any branch of your bank for verification.</i>			_____ (As in Bank's records)	√
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_____ (As in Bank's records)														

PART 2: FOR HCI'S COMPLETION

SWIFT BIC	HCI Bank Account Number	DDA Reference Number
U O V B S G S G X X X	1 2 6 3 0 9 5 3 7 0	
SWIFT BIC	Account Number to be Debited	

PART 3: FOR BANK'S COMPLETION

To: Hwa Chong Institution

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

- | | |
|---|---|
| <input type="checkbox"/> Signature differs from Bank's records | <input type="checkbox"/> Wrong account number |
| <input type="checkbox"/> Signature irregular | <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

Please delete where inapplicable

IMPORTANT NOTES

1. It is compulsory for all students to take part in the Interbank Giro scheme.
2. Application is to complete only Part 1 of this form. Please fill in the spaces indicated with a ✓.
3. Please use only BLUE or BLACK INK. Do not use pencil or other coloured ink.
4. Do not use correction tape or fluid.
5. All amendments are to be countersigned by account holder(s).
6. For thumbprint(s), please take the form and your identification to any branch of your bank for verification.
7. Only original signed hardcopy application forms will be sent to the banks for verifications.
8. You will be notified for Incomplete/Rejected form.
9. Please note that by submission of this application form, you give consent for the school to collect school fees and any other fees via Interbank Giro.