

NEW APPLICATION FORM FOR INTERBANK GIRO

PART 1: FOR APPLICATION'S COMPLETION

(Please fill in all the fields. Incomplete forms may not be processed)

Date:	Name of Applicant			Mailing Address of Applicant	
To: My/Our Bank (Name of Bank)	Billing Organisation's Customer's Reference No:		Email address of Applicant		
Amount to be deducted:		Frequency of payment: Effective Monthly 1 st day of the month		Expiry date:	
fee for this. You may also at accordingly.	ne Navigators Singapore's de its discretion allow the deb iin in force until terminated	bit instruction if r it even if this resu by the Bank's writ My/Our Signatur	ny/our account does Its in an overdraft of ten notice sent to m	s not have sufficient funds and charge me/us a in the account and impose charges ny/our address last known to the Bank or upon ny/Company's stamp as in Bank's records:	
My/Our Bank account number:		My/Our Contact	number (Telephone	e/Mobile Phone):	
	PART 2: For THE NA	AVIGATORS SINGA	PORE's completion		
SWIFT BIC		THE NAVIGATORS SINGAPORE'S account number			
DBSSSGSG		THE NAVIGATORS SINGAPORE –MISSIONARY A/C - 004-008815-8			
SWIFT BIC			ACCOUNT N	NUMBER TO BE DEBITED	
Verified by			Аррі	roved by/Date	
	PART 3	3: For Bank's comp	letion		
To THE NAVIGATORS SINGAPORE This application is hereby rejected (ple () Signature/Thumbprint diff () Signature/Thumbprint inco () Wrong account number () Others (please specify)	ers from the Bank's record		_		
Name of Bank's Approving Officer	Bank's Authorised Signature Date		Date	The Navigators Singapore 117 Lorong K Telok Kurau Singapore 425758	
				Tel: (65) 6344 4133	

Tel: (65) 6344 4133 Fax: (65) 6344 0975

Email: admin@navigators.org.sg Website: www.navigators.org.sg