

APPLICATION FOR GIRO

Instructions to client 1) This application form is meant for one individual contract. Please complete Part 1
2) Upon completion, please submit the ORIGINAL form to the above mentioned address

PART 1 : FOR APPLICANT'S COMPLETION

Client's Name	x
NRIC/Passport No.	x

Applicant's Home/Billing Address

x _____

My/Our Contact Number:

1. x _____ (Home) 2. x _____ (H/P)

My/Our Name(s) As In Bank Account:

1. x _____
2. x _____

Bank Name x _____

Bank Branch x _____

My/Our Bank Account Number:

Bank Code	Branch	Client's A/c No.

- a) I/We hereby instruct you to process the billing organisation's instructions to debit my/our account
b) You are entitled to reject the billing organisation's 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 to 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 Billing Organisation
d) Amendments made on the form must be countersigned by the applicant

x _____
My/Our Signature(s)/Thumbprint(s) as in bank records

x _____
My/Our Signature(s)/Thumbprint(s) as in bank records

PART 2 : FOR CORDLIFE TECHNOLOGIES PTE LTD'S COMPLETION

Name of Billing Organisation:

CORDLIFE TECHNOLOGIES PTE LTD

Client's Name	
Reference No.	

x UCL Contract Number(s):

S	G	0	0																
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Bank Code	Branch	Billing Organisation's A/c No
7 1 7 1	0 0 3	0 0 3 9 2 5 1 4 8 3

x Bank Code	Branch	Client's A/c To Be Debited

Bank Code Branch Code

DBS 7171 First 3 digits of the account number

POSB 7171 081

OCBC 7339 First 3 digits of the account number

HSBC 7232 First 3 digits of the account number

SCB 9496 Use '0' + First 2 digits of the account number

PART 3 : FOR FINANCIAL INSTITUTION'S COMPLETION

To: CORDLIFE TECHNOLOGIES PTE LTD

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

- ☐ Signature/ Thumbprint differs from Financial Institution's records
☐ Signature/ Thumbprint is *incomplete/ unclear
☐ Account operated by *signature/ thumbprints

- ☐ Wrong account number
☐ Amendments not countersigned by customer
☐ Others (Please specify): _____

Name of Approving Officer

Authorised Signatory

Date (day/month/year)

* Please delete accordingly