



DIRECT DEBIT AUTHORISATION

Please complete **PART I** of this form without any amendments and return to us at:
 "Singapore Cruise Centre Pte Ltd, 1 Maritime Square, #07-01 HarbourFront Centre, Singapore 099253, Attn: Finance Dept

Part 1 : For Applicant's Completion (Fill in the spaces indicated with)

Date: _____ Name of Billing Organisation "BO":
 _____ SINGAPORE CRUISE CENTRE PTE LTD

To : Name of Financial Institution Billing Organisation's Customer's Name:

Branch : Billing Organisation's Customer's Reference 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 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 my/our address last known to you or upon receipt of my/our written revocation through the BO.

My/Our Name(s) (Account Holder's Name) My/Our Contact (Tel/Fax) Number(s)/E-mail address:

My/Our Account Number : My/Our Company Stamp/Signature(s) Thumbprint(s)**:

(As in Financial Institution's records)
 ** For thumbprints, please go to the branch with your identification.

Part 2 : For Billing Organisation's Completion

Bank	Branch	Billing Organisation's Account No.
7 3 3 9	5 0 1	7 1 0 9 4 1 0 0 1

Billing Organisation's Customer's Ref No.

Bank	Branch	Account No. to be Debited

Part 3 : For Financial Institution's Completion

To : Billing Organisation, Address, tel etc

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

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

*Please delete where inapplicable

 Name of Approving Officer Authorised Signature and Stamp of Financial Institution Date