

**PART 1 : FOR APPLICANT'S COMPLETION**

Date :

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Name of Company :

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To : Name of Bank

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Mailing Address :

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Branch & Address :

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- (a) I/We hereby consent to Bank's disclosure of customer information relating to me/us as requested for in this document
- (b) I/We hereby instruct you to process BCA's instructions to debit my/our account.
- (c) You are entitled to reject the BCA'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 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 own written revocation through BCA.

My/Our Bank Account Name(s) :

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My/Our Contact (Tel/Fax) Number (s) :

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My/Our Bank Account Number :

Bank	Branch	Account No

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

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UEN No.(For company) COMPULSORY

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(As in Bank's records)

\*For thumbprints, please go to the branch with your identification.

CPF A/c No.(For company)/NRIC or Passport No.(for individual)

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**PART 2 : FOR BCA COMPLETION**

Bank	Branch	BCA's Bank Account no.
7 1 7 1	0 0 1	0 0 1 0 2 1 8 7 1 9

Direct Debit Authorisation (DDA) Number

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Bank	Branch	Account No. To Be Debited

**PART 3 : FOR BANK'S COMPLETION**

To : BCA Academy  
 200 Braddell Road  
 Singapore 579700  
 Attention to : Finance & Admin Unit

This Application is hereby ACCEPTED/REJECTED (delete where appropriate). If rejected, (please ✓ for the following reason(s) :

- |   |   |
|---|---|
| <input type="checkbox"/> Signature/Thumbprint # differs             | <input type="checkbox"/> Wrong account number                     |
| <input type="checkbox"/> Signature/Thumbprint # incomplete/unclear# | <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

**PART 4 : NOTIFICATION OF STATUS OF GIRO APPLICATION (TO BE COMPLETED BY BCA)**

Date : \_\_\_\_\_

The above giro application has been :

- Accepted - Please take note of Giro Direct Debit Authorisation(DDA) Number indicated in Part 2 above.
- Rejected - Please refer to the reason(s) of rejection indicated in Part 3 above. Please fill in a new application form (attached) to apply for Giro payment again.