

GIRO APPLICATION FORM

Please tick:	New App	lication	Change of Bank	Account	
	eted by applicant. Please retrields. Incomplete forms will not be		redONE		
(* Please IIII III <u>an</u> the I	leias. Incomplete forms will not be	processed			
*Date:	Name of Billing Organisation ("BO") redONE Pte Ltd				e Ltd
* rodONE Parent Accou	int ID (e.g. 500XXXXXX):				
	nt account id, please list it separately in	the boxes below)			
(h)	truct the Bank to process the BO's				
The Bank is enti	tled to reject the BO's debit instru lso at its discretion allow the debit				
(c) Amendments n	nade on the form must be count	ersigned by applicant.			
(d) This authorisation (i)	on will remain in force until The Bank's written notice sent to	mv/our address last kr	own to the Bank		
(ii) Upon the Bank's receipt of my/our written revocation; or					
(iii)	Upon the Bank's receipt of the no	tice of expiry from the I	30.		
*To: Name of Bank: *My/Our Name(s) As In Bank Account				count:	
*My/Our Bank Accoun	t No.:	*My/Our Contact No(s):			
nijyour Bunnineesun		(Please indic	ate redONE number)		
		-			
My/Our Sign	nature(s)/Thumbprint(s)*/Com	pany Stamp			
	(as in bank's record)				
	Name(s) of Account Holder				
*For thumbprint, please go to the bank with your identification documents. **Electronic signatures are not accepted, please sign with a pen.					
Part 2: For redONE Pt	e Ltd's Completion				
CIAHET / DIC	- -	IONE DE	. II A N . 1		
SWIFT / BIC OCBCSGSGXXX		redONE Pte Ltd's Account Number 695735373001 (For GIRO Payments ONLY)			
		`	· , , ,		
SWIFT / BIC	Account Number to be Debited	rec	IONE Bill Account N	ımber(s) Ver	ified By/On:
Part 3: For Bank's Co	mpletion				
To: redONE Pte Ltd					
This Application is her	eby REJECTED due to the followin	g reason(s)			
Signature / Thu	mprint [#] differs from Financial Inst	itution's records			
Signature / Thu	mbprint [#] incomplete / unclear		Amendments not co	_	oy applicant
Account operated by signature / thumbprint # Others (please specify): Wrong account number					
Name of Bank's Appro	ving Officer Authorised Si	gnature & Stamp of Fin	ancial Institution	_	Date

^{*} Please delete accordingly.