

 $One\ Raffles\ Quay\ \#22-01\ North\ Tower\ Singapore\ 048583\ |\ T\ +65\ 6336\ 0477\ |\ F\ +65\ 6339\ 2109\ |\ www.etiqa.com.sg$

INTERBANK GIRO APPLICATION FORM (TAKAFUL)

IMPORTANT NOTICE: When Etiqa received your fully completed application form, please allow us 6 to 8 weeks to process the application. You will be notified on the status of application. Until your GIRO application is approved, kindly remit payments directly to Etiqa.

A. For Applicant(s)' Completion only										
Date								Name of Billing Organisation		
								Etiqa Insurance Pte I	_td	
To: Name of Bank								Policy Owner's Name		
Branch								Policy Owner's NRIC / Passport No.		
Policy Number								Plan Name		
1.										
2.										
3.										
 (a) I / We hereby instruct you to process Etiqa Insurance Pte Ltd's (Etiqa) instructions to debit my / our account below as instructed and / or to debit such sum(s) as Etiqa may notify you from time to time. (b) You are entitled to reject Etiqa's debit instructions 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 authorization will remain in force until revoked by me / us by written notice delivered to you. You may in your absolute discretion terminate this arrangement by written notice to me / us delivered to my / our last known recorded address. (d) By providing the information in this application form and submitting this application, I further request for and consent to the collection, use and disclosure of my personal data by Etiqa and its related corporations, its agents and Etiqa sharing such personal data with Etiqa's business partners, marketing partners and the Co-Brand Partner (as may be relevant), as well as their authorised service provider, for the purpose of this form. 										
My / Our Name(s)								My / Our Contact (Tel / Fax) Number(s)		
My / Our Bank Account Number								My / Our Signature(s) / Thumbprint(s)		
								(As in Bank's records)		
B. For Etiqa Insurance Pte Ltd's Completion										
Bank Branch Etiqa Insurance's Account Number 9 6 3 6 - 0 4 0 4 0 0 0 1 9 6										
Etiqa's Reference :										
C. For Bank's Completion										
Bank Branch Account Number To Be Debited										
- Station Account Number to be Debited										
To: One Raffles Quay #22-01 North Tower Singapore 048583 The direct Debit Authorisation in respect of the above – mentioned account is Accepted Rejected due to: Signature(s) / Thumbprint(s) differs from the Bank's records Wrong Account number Others:										
Name of Approving Officer Authorised Sig								nature		Date