



Please complete Part 1 of this form. Please note that **no correction tape/fluid** should be used on this form. Any cancellations made must be endorsed by the account holder/bank.

Part 1: For Applicant's Completion (fill in the spaces indicated with a ✓)

✓ Date:	✓ Name of Billing Organisation ("BO"): Hwa Chong Institution
✓ To: Name of Bank / Finance Company:	✓ Name of Student:
✓ Branch:	✓ Student's NRIC/Fin No

- (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 so doing. 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) as in the account:	✓ My/Our Contact Tel/Handphone No(s):
✓ My/Our Account No:	✓ *My/Our Company Stamp/Signature(s)/Thumbprint(s): (As in Bank/Finance Company's records)

* If your account operates on **thumbprint**, please take this form and your passbook to your bank for the impression.

Part 2: For Billing Organisation's Completion

Bank	Branch	BO's Account No	BO's Customer Ref No
7 3 7 5	0 2 6	1 2 6 3 0 9 5 3 7 0	
Bank	Branch	BO's Account No	

Part 3: For Bank / Finance Company's Completion

To: Hwa Chong Institution
Attn: Finance Unit

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

- Signature differs from Bank's/Finance Co's records
- Signature irregular
- Account operated by thumbprint #
- Wrong account number
- Amendments not countersigned by customer
- Others: _____

Name Of Approving Officer Authorised Signature Date

Please delete where inapplicable