

DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of India International Insurance Pte Ltd. Payment will be credited directly into the Supplier's bank account stated below through Interbank Giro. The Supplier has to complete Part I of the form, obtain his banker's certification in Part II and return the duly completed form to India International Insurance Pte Ltd.

(Name of Paying Organisation)

Part I (To Be Completed By Supplier)

(A) To: India International Insurance Pte Ltd
(Name of Paying Organisation)

Supplier's Particulars:

Name : Charn's Customcraft
Address : Blk 1010 Bukit Merah Lane 3 #01-105 (S) 159724
Telephone Number: 62717054 Fax Number: 62736676
Name of Bank : DBS Name of Branch: Alexandra Retail Centre
Account Number To Be Credited : 006-002-1360

I/We hereby authorise India International Insurance Pte Ltd to credit payments due to me/us to the above account.
(Name of Paying Organisation)

This authorisation shall continue to be in force until I/we have expressly revoked it by notice in writing delivered to you. You may in your absolute discretion terminate this arrangement by written notice delivered to my/our address last known to you.

In the event of a change of bank account, I/we shall inform you in writing 2 weeks in advance before the change.

(B) To: Charn's Customcraft
(Name of Supplier's Bank)

I/We hereby consent to the Bank's disclosure of customer information relating to me/us as requested for in this document.

CHARN'S CUSTOMCRAFT

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Signatures and Company's stamp As In Bank Account

20 SEP 2019

Date

Part II (To Be Completed By Supplier's Bank)

To: India International Insurance Pte Ltd
(Name of Paying Organisation)

Without responsibility on the part of the Bank or the signing officer, we confirm that the signature/other particulars agree with that in our files. The account number to be presented in the Interbank Giro format is as follows:

Bank

Branch

Account Number

7171

006

0060021360

Without responsibility on the part of the bank or the signing officer, we confirm that the signature(s) / others particulars agree with the specimen held in our file.

DBS BANK LTD

Name & Signature of Authorised Bank Officer Alexandra Branch

20 SEP 2019

Date

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Authorised Signature