

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 : WTS Engineering Pte Ltd
Address : 8 Gul Circle, Singapore 629564.
Telephone Number: 6559-8983 Fax Number: 6898-2394
Name of Bank : United Overseas Bank Name of Branch: Boon Lay
Account Number To Be Credited : 363-300-348-1

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: United Overseas Bank
(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.





21 AUG 2019

Signatures and Company's stamp As In Bank Account

Date

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

To: _____
(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

7375

035

3633003481

In making the certification, the Bank does not purport to make any representation as to the correctness or authenticity of the signature(s) / particulars. We expressly disclaim and take no responsibility for any loss, cost, damage or liability to any person that is based on, or arises out of, whether directly or indirectly, the certification.

Name & Signature of Authorised Bank Officer

21 AUG 2019

Date

JURONG POINT BRANCH

MOK PECK WUANG ELSIE
01459

AUTHORISED SIGNATURE