DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of Mega Auto Pte Ltd . Payment will be credited directly	
(Name of Paying Organisation) 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)	
rait I (10 Be Completed By Supplie1)	
(A) To: India International Insurance Pte Ltd (Name of Paying Organisation)	
Supplier's Particulars:	
Name :MEGA AUTO PTE LTD	
Address : 160 SIN MING DRIVE # 02-01 AUTO CITY SINGAPORE 575722	
Telephone Number: 6455 5884 Fax Number: 6458	5884 BANK
Name of Bank :: DBS BANK LTD Name of Branch:	THOMSON BRANCH 0015
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:	
I/We hereby consent to the Bank's disclosure of customer information relating to me/us as requested for in this document.	
John white what	2 4 JUN 2020
Signatures and Company's stamp As In Bank Account	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	
7 17 1 0 1 5 0 1 5 9 0 1 8 7 7 6 Squing officer, we confirm that the signature(s) (5 others particulars agree with the specimen held in THOMSON)	
Name & Signature of Authorised Bank Officer Name & Signature of Authorised Bank Officer	2 4 JUN 2020 ——————————————————————————————————
SUNATI AHMAD 7 / HIM 2020	
Authorised Signature	