

DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of _____, 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

(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 : Nineteen Autoworks Pte Ltd
Address : Blk 13 Kaki Bukit Road 4 #01-05, Bartley Biz Centre, Singapore 417807
Telephone Number: (65) 9770 5882 Fax Number: _____
Name of Bank : OCBC Name of Branch: _____
Account Number To Be Credited : 588 155 739 001

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: OCBC
(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.



[Signature]
Signatures and Company's stamp As In Bank Account

28/05/2020
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
7333	588	155739001

[Signature]
Chai Wan Ping
8985
OCBC Bank

28 MAY 2020

Name & Signature of Authorised Bank Officer 28 MAY 2020

Date