

PASIR RIS-CHANGI TOWN COUNCIL DIRECT CREDIT AUTHORISATION FORM



For new application, the credit cardholder is required to submit the completed form to any Pasir Ris-Changi Town Council's offices in person and present his/her credit card and NRIC for verification. For any enquiries, please contact the Finance Dept at 6585 4938.

(A) APPLICANT'S PARTICULARS* (MANDATORY)

Date of Submission:	Town Council Reference No.:																					
<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>															
D	D	M	M	Y	Y																	

FOR REGISTERED LESSEE

Name: <i>Registered Lessee 1</i>	Partial NRIC No.: <i>Provide only last 3 digits & last alphabet NRIC, FIN or other National Identification Number</i>
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Email Address:	Partial NRIC No.: <i>Provide only last 3 digits & last alphabet NRIC, FIN or other National Identification Number</i>
Name: <i>Registered Lessee 2</i>	

Email Address:
Address:

FOR RESALE PURPOSE ONLY

New Address:	Resale with effect from:								
	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		

FOR SUPPLIER ONLY

Unique Entity No. (UEN)															
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Address:	Email Address:														

BANK ACCOUNT DETAILS (AS PER BANK'S RECORD)

Name: <i>Bank Account Holder 1</i>	Name: <i>Bank Account Holder 2</i>
Contact No.	Contact No.
Name of Bank:	Bank Branch & Account Details: ()

Relationship to Applicant: Self / Others; Please specify

- I/We hereby confirm that the particulars stated are accurate and will not hold Pasir Ris-Changi Town Council liable for any losses, costs and expenses arising thereon.
- Payment will be credited directly into the bank account provided in this application through Interbank Giro.
- Supporting documents such as bank statements and/or copies of identification card of related parties may be required for verification purposes.

(B) ACKNOWLEDGEMENT OF APPLICANT(S)

Signature / Thumbprint (Verified in person by Bank) <i>Registered Lessee / Authorised Signatory 1</i>	Signature / Thumbprint (Verified in person by Bank) <i>Registered Lessee / Authorised Signatory 2</i>
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Company Stamp for Registered Company

(C) FOR OFFICIAL USE ONLY

Date Received:	Effective Date:	Verified By: <i>Name & Initial</i>

Pasir Ris Office
Block 577 Pasir Ris Street 53
#01-88 Singapore 510577

The Pasir Ris-Changi Town Council's (The "Town Council") collection, use and disclosure of your personal data are described in its Personal Data Protection Policy, a copy of which is available at the Town Council office and accessible online at <https://www.pasirrischangi-tc.org.sg/index.php/our-policies/personal-data-protection-policy>. Please note that, by using the Town Council's services, you signify that you have read, understood and agreed to relevant portions of the Policy.