



**REGISTRATION FORM FOR PAYMENT VIA ELECTRONIC FUND TRANSFER (EFT)**

New Registration                       Change of Details

**A. BENEFICIARY DETAILS**

NAME OF APPLICANT / COMPANY  
 NRIC NO. / COMPANY REGISTRATION NO.  
 BUSINESS ADDRESS

SST REGISTRATION NO.     Sales     Service

BUSINESS TELEPHONE NO.  
 EMAIL ADDRESS  
 PERSON-IN-CHARGE  
 PERSON-IN-CHARGE CONTACT NO.


**B. BENEFICIARY BANKING DETAILS**

NAME OF PAYEE  
 NAME OF BANK  
 BANK ADDRESS  
  
 BANK ACCOUNT NO./IBAN NO.  
 SWIFT CODE/ABA CODE  
 EMAIL ADDRESS FOR RECEIVING  
 REMITTANCE ADVICE

1.
2.
3.
4.

SIGNATURE

COMPANY STAMP

NAME   
 IC NO.   
 POSITION (Note)

DATE

Note: The authorized personnel must be either Finance Manager or Company Director or Head of Company Secretarial or personnel holding highest position in Regional/ country or Sole Proprietor.