



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

NAME

IC NO.

POSITION (Note)

COMPANY STAMP

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.