

To : _____ (“the Bank”)

_____ Branch

Date : _____

Authorisation by Account Holder(s)

I/We, _____ (“Applicant”) hereby authorise
(Name of Account Holder/ Company)

_____ (“Recipient”) of NRIC _____ to
(Name as per NRIC)

collect the following on my/ our behalf:

Statement of accounts for the month(s) of _____
(to include the year)

Account Number _____

I confirm that I have obtained the consent of the third party individuals stated in this form for the collection, use and disclosure of their personal data to you, for the purposes related to the processing of this form.

Signature of Account Holder (1)
Company’s Stamp required (if any)

Signature of Account Holder (2)
Company’s Stamp required (if any)

Signature of Account Holder (3)
Company’s Stamp required (if any)

Signature of Account Holder (4)
Company’s Stamp required (if any)