

Please complete form in BLOCK letters in the application parts below.



(*) Delete if not applicable.

		PA	ARTICUL	ARS OF	ACCOUNT	HOLD	ER						
Name (as in NRIC	C/Passport)					N	IRIC/PP	No					
*DBS/POSB *Savings/Current	A/C No.						Contact I	No					
	PA	RT 1: /	AMENDM	ENT OF	PAYMENT	INSTR	UCTIO	NS					
receive my/our re following: (a) the service cl	orise DBS to amend m quest for the amendmen narge of S\$5 per amen ney to the following pa	ents to b	e updated	. Please	debit from my	our DB	S/POSB	Accour	nt numbe				
Existing Beneficia	ry's Name (in full)											_	
Account No.		(Fill in Beneficiary's Account No. to credit)											
Reference No. (if	any)												
Please tick the fi	elds to be amended:												
☐ New Payment	Amount			-	conto								
New Date of Payment (Compulsory field)													
☐ New Frequence	ey of Payment 🛚 D aily	(except	Sun/PH)	□ w eekl	√ M onthly	☐ Eve	ry 2 wee	ks 🗆 (Quarterly	⁄ □ Ha	alf-Ye	early [□ Y ear
New Last Payment Amount (If differs from amount of payment) - New Date of Last Payment (Compulsory field) - Cents New Date of Last Payment M M M Y Y Y Y Y													
New Date of Last Payment New Date of Last Payment Please fill in 129999 for no expiry date													
				MINATIO	ON OF INST	FRUCT	IONS						
	orise DBS to terminate quest for the termination			nstructior	n. I/We accep	t that DE	3S requir	e up to	4 workii	ng day	s fror	n the	day DB
Existing Beneficia	ry's A/C No. and Name	e (in full)											
Reference No. (if	any)					1							
Bank	Branch]	Account No.								
				ACRE	EMENT						_		
I/Me will not hold	DBS liable for any con	segueno	res arisina			ligence	delavs o	r omiss	ions with	n the a	hove	requ	est
i/vve wiii not noid	DBG liable for arry corr	sequent	bes ansing	out or an	ly enois, neg	ilgerice,	uciays o	Omiss	SIOIIS WILI	i tile a	DOVE	течи	csi.
Authorised Signature(s)/Thumbprint(s) of Account Holder(s)#							Date						
	taken and witnessed at DBS on accounts, authorized sign		accordance to	o company/	association's aut			k compar	ny stamp (i	f applica	ble) aı	re requ	ired.
Branch Action by Branch							Action by Cheque & Giro						
	Attended by: (Name, Signature, Date) Authorised by: (Name, Signature, Date)					Date)	Verified by:						
SV CS CS						Keyed in I							
						Report ch							

DBS BANK LTD Co. Reg. No. 196800306E SI-02(07/2014)