

Managed by CapitaLand Commercial Management Pte Ltd
(a subsidiary of CapitaLand Singapore Limited)

I am applying to pay for:

Season Parking
Vehicle No.: _____

Application Form For Interbank Giro

Part 1: For Applicant's Completion (Fill In The Spaces Indicated With ✓)

Date: (✓)

Name of Billing Organisation ("BO"):
HSBC Institutional Trust Services (Singapore)
Limited as Trustee of CapitaLand Commercial Trust

To: Name of Bank: (✓)

Billing Organisation's Customer's Reference Number
(Season Parking):

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Branch: (✓)

- (a) I/We hereby instruct you to process the BO's instructions to: (i) debit my/our account for outstanding charges and (ii) to credit the same account for refunds. Amounts credited would constitute a valid discharge of the BO's obligations due to me/us in respect of such amounts.
- (b) You are entitled to reject the BO's debit instructions if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
- (c) This authorisation will remain in force until terminated by your written notice sent to my/our address last known to you or upon receipt of my/our written revocation through the BO.

My / Our Name(s) as in Bank Account: (✓)

My / Our Contact: (✓)

Tel	
HP	
Email ²	

My / Our Company Stamp / Signature(s) / Thumbprint(s)¹: (✓)

(As in bank's records)

My/Our Account Number: (✓)

SWIFT BIC ³	Account No to be debited

Part 2: For Billing Organisation's Completion

Bank Account Name of Billing Organisation:

HTSG - CAPITACOM CT COLL

Verified by:

SWIFT BIC	Billing Organisation's Account No
DBSSSGSGXXX	0039010010

Part 3: For Applicant's Bank's Completion

To: Billing Organisation

This Application is hereby **REJECTED** (please tick) for the following reason(s):

- Signature/Thumbprint differs from Bank's records
- Signature/Thumbprint incomplete/unclear
- Account operated by signature/thumbprint
- Wrong account number
- Amendments not countersigned by customer
- Others: _____

Name of Approving Officer

Authorised Signature

Date

¹ For thumbprints, please go to the branch with your identification.
² Required for notification of refunds.
³ Please obtain SWIFT BIC code from your bank if you are unsure.

Please seal with tape

Please seal with tape

Please seal with tape

Please fold here

Please affix
stamp here or
self-deliver

CapitaLand Commercial Management Pte. Ltd.

168 Robinson Road
#30-01 Capital Tower
Singapore 068912

Attn: Finance Department (Level 28 - CCT)

Please fold here

Please seal with tape