\square WRONG ACCOUNT NUMBER



Monthly Funds Transfer Application

Please use **BLOCK** letters and delete where applicable.

 \square SIGNATURE/THUMBPRINT DIFFERS FROM BANK'S RECORDS

OTHERS (PLEASE SPECIFY):

NAME OF APPROVING OFFICER:

APPLICANT'S INFORMATION						
Name as per CIMB Bank Account (Underline surname):		☐ Dr	Mr	Mrs	Ms	Mdm
NRIC/Passport/FIN No.:	Account No. to be Credi	ited:				
Home No.:	Mobile No.:					
TRANSFER INSTRUCTIONS						
Name of Debiting Bank/Financial Institution:						
Name as per Debiting Account (Underline surname):		☐ Dr	Mr	Mrs	Ms	Mdm
Debiting Account No.:						
Monthly Transfer Amount (Minimum S\$100):	Commencement Date (D	DD/MM/YY	YY):			
	Final Payment Month (MI					
Customer Reference (Maximum of 35 alpha-numeric characters including spathe customer reference will be reflected as "Monthly Funds Transfer - CIMB"):	aces will appear in the statements	s of both de	ebiting and	crediting ac	counts. If I	eft blank,
 a. Request and authorise and instruct the Debiting Bank to transfor \$\$100) to CIMB Bank, subject further to the Terms and Cond correspondingly request and authorise CIMB Bank to instruct th b. Acknowledge and agree that: CIMB Bank may reject or decline to act on any instruction at my/our submission of this application and acceptance of this our application and that CIMB Bank reserves the right not to the Debiting Bank is entitled to reject CIMB Bank's debit instr me/us a fee for this; subject to the Terms and Conditions applicable as between force until terminated by CIMB Bank's written notice sent to through CIMB Bank; subject to the Terms and Conditions applicable as between debiting account will be determined by CIMB Bank and; I/we confirm that I/we have read, understood and agreed to Signature(s)/Thumbprint(s)* as in my/our CIMB Bank Account records	itions applicable as between edebit of the Amount indicators anytime by notifying me; application by CIMB Banks approve this application with uction if my/our debiting account the Debiting Bank and my any address last known to the Debiting Bank and my	en the Del ated here shall in no ithout givi count doe yself/ours CIMB Ba rself/ourse	biting Ba bin. be way be any reas not have selves, the ank or up belves, the ons as sta	construed easons whate sufficier is authoriston my/ou a deduction	d as approper autoever autoeve	elves, and oval of my/ ; and charge I remain in revocation om my/our
Date:	Date:					
*For thumbprints, please visit the branch of the Financial Institution/Bank with whi	ch the debiting account in mainta	ained.				
FOR BANK USE ONLY						
CIMB BANK'S COMPLETION STAFF NAME/ID: REFERENCE NO.:	I	DATE:				
CREDITING BANK:			TO BE CRE	DITED:		
DEBITING BANK:			TO BE DEB			
DEBITING BANK'S COMPLETION THIS APPLICATION IS HEREBY REJECTED (PLEASE TICK FOR THE FOLLOWING REASONS		ACCOUNT	TO BE DEB	ITED:		

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AUTHORISED SIGNATORY:

 \square SIGNATURE/THUMBPRINT INCOMPLETE/UNCLEAR

DATE:

TERMS AND CONDITIONS

- Definitions: 'I', 'my' and 'me' means the CIMB Bank Berhad (CIMB Bank or the 'Bank') account holder or the person, who has by signing on this form consented to his account maintained with the Debiting Bank being nominated for the debiting of the designated amount on the terms and subject to the conditions of this form and these Terms and Conditions, and 'your' means CIMB Bank.
- Authorisation for Submission: I expressly authorise you (where applicable) to submit this form on my behalf to the financial institution.
- Exclusion: I agree that you shall not be liable in any way for any loss of profits, business, goodwill or opportunity or indirect, special or consequential loss or damages which any other persons may suffer or incur in connection with you giving effect to and carrying out the instructions in any way whatsoever and (without prejudice to the generally of the foregoing) whether arising from fraud, negligence, breach of contracts, strict liability or otherwise by you or your officers, employees and agents. I agree that you will not be liable
- for any delay, mistake, refusal, neglect or omission in the transmission of any instructions or the making of any payment under the same.

 Disclosure: I hereby irrevocably authorise you and your officers, employees and agents to give, disclose, divulge or reveal, in any manner howsoever, any customer information (as defined in the Banking Act of Singapore (Cap 19)) relating to me and my account(s) or any other information to any third party (including the financial institution) any information relating to me and/or my account(s) for such commercial, banking or business purposes as you at your discretion think fit. Your rights and abilities under this clause shall be in addition and without prejudice to your rights of disclosure under and pursuant to (i) the Banking Act and any other statutory provisions and in law, and (ii) any other agreement between us and nothing herein is to be construed as limiting any of those other rights.
- Indemnity: I hereby irrevocably and unconditionally undertake to fully indemnify you and all your employees, nominees, directors and agents and hold you harmless against all losses, damages, liabilities, cost and expenses which you may suffer or incur (including legal costs on a full indemnity basis) as a result of your acting or carrying out, delaying in acting or carrying out or failing to act or carry out any instructions pursuant to these Terms and Conditions.

 Usage of Agents: I agree that you may use any agent, contractor or correspondent as you may deem fit to carry out or procure any of the matters or transactions under this
- application and you shall not be liable for any act, omission, neglect or willful default of such agent, contractor and/or correspondent.
- Jurisdiction/Governing Law/Third Party Rights: These Terms and Conditions shall be governed by the laws of Singapore. I hereby irrevocably submit to the non-exclusive jurisdiction of the courts of Singapore. A person who is not a party to these Terms and Conditions has no right under the Contracts (Rights of Third Parties) Act, Cap 53B to enforce any Terms and Conditions. Notwithstanding any term herein the consent of any third party is not required for any subsequent amendments or changes to these Terms and Conditions.
- Non-Clearing Days: In the event that the deduction or collection date (value date) falls on a non-clearing day (Saturday, Sunday and Public Holiday), the deduction or collection will be processed on the business day prior to the value date.

Thank you for banking with CIMB Bank. CIMB Bank Berhad (13491-P)

For assistance, please call CIMB At-Your-Service (65) 6333 7777 or email AtYourService@cimb.com



Fold Here

Business Reply Service Permit No. 08457

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CIMB BANK BERHAD

Attn: Remittance Department Robinson Road, P.O. Box 0088 Singapore 900138

Strictly Private and Confidential

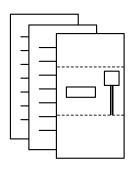
Postage will be paid by addressee.



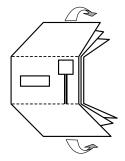
Seal here with clear tape



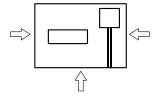
HOW TO USE THE BUSINESS REPLY ENVELOPE (BRE)



1. Place documents together with the BRE.



2. Fold inwards along the dotted lines as indicated.



3. Seal along edges with clear tape (do not staple). Drop sealed envelope into post box.