



Application for Premium Payment by Interbank GIRO

Part 1: For applicant's completion (fill in the Name of bank:	e spaces indicated with √) Name of billing orga	nication	
Name of Dank:	HSBC Life (Sing		
√Policy Number(s)		apore, rec. Eta.	-
(Note to Banks: to be used as DDA reference number)	Name of Policyholder(s)	NRIC Number(s)	1
			Note:
 a) I or We* instruct you to process HSBC Life (Singapore) b) You are entitled to reject HSBC Life (Singapore) f sufficient funds and charge me or us* a fee for this overdraft on the account and impose charges acco c) This authorisation will remain in force until termin or upon receipt of my or our written revocation th d) The use of correction tape is not allowed. Amenda 	te. Ltd.'s debit instruction if my on You may also at your discretion allor rdingly. nated by your written notice sent to rough HSBC Life (Singapore) Pte. Ltd	r our* account does not have ow the debit even if this results in an o my or our* address last known to you d.	 * Please delete where applicable. * If Bank Account holder is NOT the policyholder,
Part B: My or our personal part	ticulars		please furnish NRIC no. of Bank Account holder.
Bank Account holder's name	Contact numb	per(s)	■ # For thumbprints, please
√	v		go to the branch with your identification document
Bank account number $\sqrt{}$	·	to Proposer (if applicable)	for verification.
√ NRIC no. of Bank Account holder ⁺	· ·	humbprint [#] or company stamp	■ Please utilise 1 row per policy number and
√	2/		complete a new GIRO form
	(As in bank's reco	ords) Date:	if you have more than 7 policies to apply under the
Part C: Billing organisation's in	nformation		same account. ** Shield basic plan and
Bank Branch Billing Organisation	's account number		Shield rider plan contain 2
7 1 7 1 0 0 3 0 0 3 9 2	1 8 0 9 5		policy numbers.
Part D: For bank use only			
To: Operations Support, Life Operations HSBC Life (Singapore) Pte. Ltd. Robinson Road Post Office P.O. Box 1094	٦		
Singapore 902144 This application is hereby REJECTED (please tick) for t	he following reason/s):		
☐ Signature or thumbprint* differs from bank's record	• • • • • • • • • • • • • • • • • • • •	nber	
☐ Signature or thumbprint* incomplete or unclear*	☐ Amendments not co	ountersigned by customer	

Date

Authorised signature

Name of approving officer

3 simple steps to pay your premiums promptly 2 Interbank GIRO On each premium due date, keep sufficient funds in your Bank Ξ Complete this form overleaf and return it to HSBC Life. It authorises your Bank to deduct premiums from your Bank Account.

Postage will be paid by addressee. For posting in Singapore & Malaysia only.

BUSINESS REPLY SERVICE PERMIT NO. 01715

 \Box

HSBC Life.

Your Bank will transfer the premium from your Bank Account to

 $[I_{1}][I_{1}][I_{1}][I_{1}][I_{1}][I_{1}]$

HSBC Life (Singapore) Pte. Ltd. Robinson Road Post Office P.O. Box 1094 Singapore 902144