



**REGISTRATION FORM FOR PAYMENT VIA ELECTRONIC FUND TRANSFER (EFT)**

New Registration                       Change of Details

**A. BENEFICIARY DETAILS**

NAME OF APPLICANT / COMPANY	✓	
NRIC NO. / COMPANY REGISTRATION NO.	✓	
BUSINESS ADDRESS		
SST REGISTRATION NO. <input type="checkbox"/> Sales <input type="checkbox"/> Service		
BUSINESS TELEPHONE NO.	✓	
EMAIL ADDRESS	✓	
PERSON-IN-CHARGE	✓	
PERSON-IN-CHARGE CONTACT NO.	✓	

**B. BENEFICIARY BANKING DETAILS**

NAME OF PAYEE	✓	
NAME OF BANK	✓	
BANK ADDRESS	✓	
BANK ACCOUNT NO./IBAN NO.	✓	
SWIFT CODE/ABA CODE	✓	
EMAIL ADDRESS FOR RECEIVING REMITTANCE ADVICE	✓	1.
		2.
		3.
		4.

✓

SIGNATURE

COMPANY STAMP

✓

NAME

✓

IC NO.

POSITION (Note)

✓

DATE

Note: The authorized personnel must be either Finance Manager or Company Director or Head of Company Secretarial or personnel holding highest position in Regional/ country or Sole Proprietor.