

TERMINATION OF INTERBANK GIRO

Chua Chu Kang Town Council
(Main Office)
Blk 309 Choa Chu Kang Ave 4
#02-02 Choa Chu Kang Centre
Singapore 680309
Tel : 6764 3295

To: Name of Billing Organisation : Chua Chu Kang Town Council

Name of Customer : _____

Account/ Bill Reference No : C_____

Name and Branch of Bank : _____

Bank Account Number : _____

I/We wish to terminate my/our Interbank GIRO authorisation in respect of the above mentioned Account/Bill Reference No. with effect from _____.

Name of Account Holder(s)

Contact (Tel/HP) Number

Signature/Thumb print

Date