Dear Valued Customers,

You have elected to use GIRO for your Season Parking payments

1) Please complete this page and submit it along with the GIRO form.

   This will enable us to match your GIRO with your application you have submitted online.

   First Name: _____

   Last Name: _____

   Contact Number: _____

   Car Park Location: _____

2) Please proceed to make 3 months Season Parking payment to through our online website.

3) Kindly submit the **ORIGINAL** form by **post/mail** to our address below.

**To : LHN Parking Pte Ltd**
**10 Raeburn Park #02-18**
**Singapore 088702**

Additional Vehicle List

| Vehicle Number | IU Number | Vehicle Type (C, M, CV, HV) |
|---|---|---|
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C – Car; M – Motorcycle; CV – Commercial Vehicle;
HV – Heavy Vehicle

LHN PARKING
Your Trusted Car Park Operator

**OCBC Bank**
Oversea-Chinese Banking Corporation Limited

**APPLICATION FORM FOR INTERBANK GIRO**

## PART 1 : FOR APPLICANT'S COMPLETION (fill in the spaces indicated with ✓ )

Date:

✓ _____

Name of Billing Organisation ("BO"):

**LHN PARKING PTE LTD**

To: Name of Bank

✓ _____

Billing Organisation's Customer's Name

_____

Branch:

✓ _____

Billing Organisation's Customer's Reference Number:

_____

(a) I/We hereby instruct you to process the BO's instructions to debit my/our account.
(b) You are entitled to reject the BO's debit instruction 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 authorization 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.

Name of Bank Account Holder(s):

✓ _____

Contact (Tel/Fax) Number(s) of Tenant:

✓ _____

Bank Account Number:

✓ _____

Stamp/Signature(s)/Thumbprint(s)*:

✓ _____
(As in Bank's records)

## PART 2 : FOR BILLING ORGANISATION'S COMPLETION

| SWIFT BIC | Billing Organisation's Account No. |
|---|---|
| OCBCSGSGXXX | 629127006001 |

| Billing Organisation's Customer's Ref No. |
|---|
| |

| SWIFT BIC | Account No. to be Debited |
|---|---|
| | |

## PART 3 : FOR BANK'S COMPLETION

To : Billing organisation

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

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

_____ Name of Approving Officer

_____ Authorised Signature

_____ Date

* For thumbprints, please go to the branch with your identification

# Please delete where inapplicable