

Application for Interbank GIRO for Children Development Account (CDA)

NEW GIRO Instruction

DELETE GIRO Instruction

Part 1 for Applicant's Completion

Name of Child (as in CDA)			
Birth/Citizenship Certificate No. of Child	T		
Bank	Standard Chartered Bank	Branch	
Children Development Account No.			
Trustee's Name (as in CDA)			
Name of Approved Institution* (AI)			

(Please check with your AI for the correct AI name used to deduct CDA funds)

* "Approved Institution" means child care centre, kindergarten, special education school or healthcare institution in respect of which approval has been granted to a person as an approved person under regulation 11 of Children Development Co-Savings Act 2001.

Important:

- a. I hereby instruct you to process the Approved Institution's instructions to debit my CDA.
- b. You are entitled to reject the Approved Institution's debit instruction if my CDA does not have sufficient funds and charge me a fee for this.
- c. This authorization remains in force until terminated by your written notice sent to my address last known to you or upon receipt of my written revocation through the Approved Institution.

Trustee's Signature / Thumbprint
(For thumbprints, please proceed to the bank with your identification)

Date

Part 2 for Approved Institution's Completion

Bank	Branch	Approved Institution's Account No	Birth/Citizenship Certificate No. of Child
			T
Bank	Branch	Children Development Account No	Approved Institution's Reference No.
7	1	4	4
0			

Part 3 for Financial Institution's Completion



To: Approved Institution

This application is hereby REJECTED for the following reason(s):

- | | |
|--|---|
| <input type="checkbox"/> Signature/Thumbprint differs from Financial Institution's records | <input type="checkbox"/> Wrong account number |
| <input type="checkbox"/> Signature/Thumbprint incomplete/unclear | <input type="checkbox"/> Amendments not countersigned by customer |
| <input type="checkbox"/> Account operated by signature/thumbprint | <input type="checkbox"/> Others _____ |

Name of Approving Officer

Authorised Signature / Date