

SWIFT MT STATEMENT APPLICATION FORM

Instruction: Please complete the form in capital letters and ensure all the mandatory fields (*) are filled up accordingly and [X] on the applicable boxes.

(A) PARTICULARS OF APPLICATION

Type of Application*:	<input type="checkbox"/> New Application	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Termination																
Applicant's Name*:																			
Debit Account No.*:	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																		
MT Frequency	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly																
E-mail Address*:																			

(B) ACCOUNT STATEMENT INFORMATION

Account No.*	Receiving Party/ Bank's Name *	SWIFT Code*	SWIFT Type* (MT940/950)

(C) DECLARATION BY ACCOUNTHOLDER/ AUTHORIZED PERSON

I/We hereby agree that I/We have read and understood the contents of this Application Form and the Terms and Conditions governing on SWIFTNet – Standardised Corporate Environment and agree to be bound by them.

Authorized Person	Authorized Person	Authorized Person	Authorized Person
Name:	Name:	Name:	Name:
Date:	Date:	Date:	Date: