

Step 1 – Print the form, complete and sign it.

Step 2 – Mail the completed form to: 150 Cecil Street #01-00, Singapore 069543

Name (as in NRIC / Passport):	
NRIC / Passport No.:	Contact No.:

Fixed Deposit Account No.:	
Fixed Deposit Advice No.:	Fixed Deposit Maturity Date:

RENEWAL / WITHDRAWAL OF FIXED DEPOSIT
<input type="checkbox"/> Renew principal and interest for _____ months. <input type="checkbox"/> Renew principal for _____ months and withdraw interest. <input type="checkbox"/> Withdrawal of principal and interest. <input type="checkbox"/> Partial withdrawal of \$_____ and the balance amount to be placed for _____ months. <input type="checkbox"/> Others (please specify): _____
<p>Note: All FD placements/renewals will be at SFL prevailing interest rates. Placements/Renewals which are eligible for any on-going promotional interest rates, will be accorded accordingly.</p>

MODE OF PAYMENT
<input type="checkbox"/> Credit to SFL Savings Account No. _____ <input type="checkbox"/> Bank Transfer <input type="checkbox"/> MEPS Transfer (for amount >S\$200,000) Recipient's Account Number _____ Recipient's Name _____ Bank Name _____
<div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Bank Transfer/ MEPS Transfer: I/We hereby declare the information provided is true and correct. x </div>
<ul style="list-style-type: none"> The Recipient's Name and Bank Name provided in this Fixed Deposit Instruction Form are for reference only. Please ensure that the Account Number provided is accurate. Singapura Finance Ltd (SFL) will process the payment instruction based solely on the Account Number indicated above. SFL shall incur no liability whatsoever in respect of any error or omissions in the funds transfer to the recipient and agree to indemnify SFL from and against all claims, demands, losses, actions, proceedings, damages, charges and expenses, including legal costs on a full indemnity basis, arising from SFL's acceptance of and actions taken in response to this funds transfer instruction. A service charge of S\$20 will be imposed for MEPS transfers.

COLLECTION OF FIXED DEPOSIT ADVICE
<input type="checkbox"/> Self-collection at _____ Customer Centre <input type="checkbox"/> By normal mail* to the mailing address in SFL records *SFL shall not be held responsible for any lost/ damaged mails.

AUTHORISATION & AGREEMENT

I hereby agree to abide by the Terms & Conditions as prescribed by SFL from time to time for the above Fixed Deposit advice and confirm that the information given is correct.

Signature/ *Thumbprint Of Account Holder	Signature/ *Thumbprint Of Account Holder
Date:	Date:

Note: For Joint AND accounts, the signatures of all the joint account holders are required. *Thumbprint must be affixed in the presence of SFL staff. Please bring along your NRIC/Passport for identification purposes.

FOR OFFICE USE ONLY

Verified by : (Name/ Signature/ Date)	Checked & Approved by: (Name/ Signature/ Date)
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