

STANDING ORDER REQUEST FORM

Date:

To: The Manager

ABC BANKING CORPORATION LTD

Branch:

Please debit my/our Account No

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with the sum of

C	C	Y

..... (words)

..... (figures) on and effect the following standing order:

Beneficiary Details

Name :

Account No :

At Bank/Branch :

Customer Reference :

Start Date Frequency End Date.....

- Note: (1) Please debit my/our above account with relative charges
 (2) We undertake to maintain sufficient funds in the account on due dates, failing which, the bank has the option to cancel this standing order without prior notice to me/us.

Customer Name:

Signature

Address:

.....

.....



For Bank Use Only

Processed by

Verified by

Approved by

Signature

Signature

Signature

Date:

Reference No: