

Date

Customer No.

Application for Setup Direct Debit Authority (DDA) Option (eBOS)

Customer Name

If you wish to setup DDAs using eBOS, please provide the following details:

User ID

User's Full Name

Email

(Please fill the email address to be used for all DDA correspondences)

Date

User's Signature

Account Authorized Signature

(The signature must be certified by the Bank)

For Bank Use

Authorized Signature

Verified By