



APPLICATION FORM FOR RECURRING CREDIT CARD PAYMENT SCHEME

Please Tick <input checked="" type="checkbox"/>	:	<input type="checkbox"/> New Application	<input type="checkbox"/> Change of Credit Card
IMPORTANT NOTICE <i>* All information on this form must be fully completed otherwise the payment cannot be processed.</i>			
To: Sembawang Town Council Block 504C Canberra Link #01-63 Singapore 753504 Attn: Finance Department			
I hereby authorize Sembawang Town Council to charge my monthly service and conservancy charges to my credit card (details below):			
Name of Resident	:	: (Mr/Mrs/Mdm/Miss) _____	
Address	:	: _____	
Contact Number	:	(H) _____ (O) _____ (HP) _____	
Town Council Ref Number	:	: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/>	
<u>CREDIT CARD DETAILS</u>			
Type of Card	:	<input type="checkbox"/> Mastercard <input type="checkbox"/> Visa Name of Credit Card Company : _____	
Cardholder's Name	:	: _____	
Card No.	:	: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Card Expiry Date (MM/YYYY)	:	: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Cardholder's Signature	:	: _____	
Date	:	: _____	
Note:			
1) This recurrent credit card payment arrangement will continue to be in effect unless Sembawang Town Council is informed in writing to terminate it, or the Town Council receive a notification from the credit card company.			
2) If we are unable to make the deduction of settlement with your card company for any reason whatsoever, lessee or tenant shall remain liable to the Town Council for the charges under the Town Council reference number as stated above.			
3) Further, we will not be liable to you for any charges incurred on the credit as a result of our deductions as authorised herein.			
4) The Town Council reserves the rights to reject any incomplete application.			

Offices:

Main Office : Block 504C Canberra Link #01-63 Singapore 753504

Collection Centre : Block 676 Woodlands Drive 71 #06-04, Kampung Admiralty Singapore 730676

Collection Centre : Block 411 Yishun Ring Road #01-1819 Singapore 760411

Website : www.sbtc.org.sg E-mail: feedback@sbtc.org.sg

Tel: 6368 3100 Fax: 6368 2271

Finance Section

Tel: 6368 7094 / 6368 7116