

Application for Verification of Account Balance

To: THE SHANGHAI COMMERCIAL & SAVINGS BANK, LTD., SINGAPORE
 BRANCH (the “Bank”)

Date:

Ref:

I/We hereby request the Bank to verify the account balance in my/our account with the Bank, as follows:

Account Name : _____
 Deposit Type : _____
 Account No. : _____
 Account Balance : _____
 Certification Date : _____
 Application Purpose : _____
 No. of Copies : _____

Please deduct the relevant administrative fees, charges and/or commission (in accordance with the Bank’s published schedule of fees) relating to this application from my/our A/C No. _____.

Signature of Account Holder / Authorised Signatory:

 (Please sign in accordance with the specimen signature card)

For Bank’s Use Only			
Verified by	Customer Service Officer	Senior Customer Service Officer	Operations Manager