

DIRECT CREDIT AUTHORISATION FORM - PAYNOW

This form is applicable to non-suppliers e.g. grantees. For suppliers, you should create or update your bank details in Vendors@Gov.

No correction tape/fluid should be used on this form. Any cancellation made must be endorsed by the same authorised signatories signing this form.

Please fill up this form so that all future payments from Singapore Food Agency (SFA) will be credited to your bank account linked to the PayNow Proxy.

Please submit the form to the relevant contact at SFA whom you have been liaising.

PART I : TO BE COMPLETED BY APPLICANT			
To: SFA			
■ Name			Contact Person
■ Address			Email Address
			(Payment notification will be sent to this email)
GST Registered Yes / No			Telephone Number
GST Registered No			
Corporate Entities*	Inc	divid	lual*
PayNow Nickname (in bank records)		Pa	yNow Nickname (in bank records)
■ UEN No (for all UEN registered entities)		NF	RIC / FIN No
■ 3 character alpha-numeric suffix (if applicable)			
(a) I/We hereby authorise Singapore Food Agency to credit payments due to me/ us to the bank account linked to the above PayNow Proxy. Amounts so credited would constitute valid discharge of obligations due to me/ us from SFA. (b) This authorisation shall continue to be in force until I/We have notified SFA in writing.			
■ Date ■ Authorised signature (s) & Stamp^ as in Bank's Record			

^{*} Please complete as appropriate, either as corporate entity or an individual, but not both

[^] if required by company's account mandate