

# Standing Instructions (SI) Form



Live more,  
Bank less

Date:

Note:

1. Please fill the form in BLOCK letters
2. Demand Drafts/Cashier's Orders will be dispatched directly to the beneficiary bank
3. Depending on the number of debits and credits, please fill up the transaction details accordingly.

I/We wish to apply for (Please tick where applicable)

New Standing Instruction       Amendment to SI \_\_\_\_\_       Cancellation of SI \_\_\_\_\_

## Applicant's Particulars

Name	<input type="text"/>
Contact No.	<input type="text"/>
Account Number	<input type="text"/>

## Standing Instructions Details

Remittance Currency	<input type="checkbox"/> INR <input type="checkbox"/> USD <input type="checkbox"/> Others _____
Amount in figures	<input type="text"/>
Amount in words	<input type="text"/>
Mode of Payment	<input type="checkbox"/> Telegraphic Transfer (TT) <input type="checkbox"/> Demand Draft (DD) <input type="checkbox"/> Cashier's Order (CO) <input type="checkbox"/> Internal Transfer (DBS account) <input type="checkbox"/> Real Time Gross Settlement (RTGS)
Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Day of week (MonSat) : _____ From first payment date <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> On the ____ day of the month where the <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly <input type="checkbox"/> instruction needs to be executed
SI Conditions	If execution date falls on a public holiday : <input type="checkbox"/> Execute the day before <input type="checkbox"/> Execute the next day <input type="checkbox"/> Skip execution First Payment date : _____ <input type="checkbox"/> SI Expiry Date : _____ /Until Further notice*
Limits (Select one or more limits)	<input type="checkbox"/> Do not execute SI if A/c ID _____ balance falls below _____ <input type="checkbox"/> Execute SI only if A/c ID _____ balance is above _____ <input type="checkbox"/> Monthly

## Transaction Details (Part II)

Name	<input type="text"/>
Account Number	<input type="text"/>
Amount	Fixed / Contra Balancing / Variable* For fixed amount: Indicate amount and Currency : _____ Debit/Credit* For variable amount _____ % of the account when A/c ID _____ balance is in excess/shortage of _____. (Debit/Credit*)
Payment Details (eg. Beneficiary's bank) <i>(For TT, RTGS, DD only)</i>	<input type="text"/>

**Transaction Details (Part III)**

Name <input type="text"/>	
Account Number <input type="text"/>	
Amount	Fixed / Contra Balancing / Variable* For fixed amount: Indicate amount and Currency : _____ Debit/Credit* For variable amount _____ % of the account when A/c ID _____ balance is in excess/shortage of _____. (Debit/Credit*)
Payment Details (eg. Beneficiary's bank) <i>(For TT, RTGS, DD only)</i>	

**Transaction Details (Part IV)**

Name <input type="text"/>	
Account Number <input type="text"/>	
Amount	Fixed / Contra Balancing / Variable* For fixed amount: Indicate amount and Currency : _____ Debit/Credit* For variable amount _____ % of the account when A/c ID _____ balance is in excess/shortage of _____. (Debit/Credit*)
Payment Details (eg. Beneficiary's bank) <i>(For TT, RTGS, DD only)</i>	

*For my/our account and risk without any responsibility or liability to yourselves and subject to the conditions overleaf which I/we have read and understood. Please effect the transaction as detailed above.*

Applicant's Signature (with stamp/seal):	Signature (with stamp/seal) for Account in Part II:	Signature (with stamp/seal) for Account in Part III:	Signature (with stamp/seal) for Account in Part VI:
DBS Bank India Limited DBS Bank India Limited	DBS Bank India Limited DBS Bank India Limited	DBS Bank India Limited DBS Bank India Limited	DBS Bank India Limited DBS Bank India Limited

Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

**For Bank Use**

Attended By	Signature Verified By	Processed By	Authorised By	SI Number

*\*Delete whichever is not applicable*