

GIRO APPLICATION FORM FOR INDIVIDUAL INCOME TAX

For payment and refund of Individual Income Tax

This form will take you less than 5 minutes to complete.

1. Please countersign against any amendment made on this form. Do not use correction fluid/tape.
2. Mail the completed form to IRAS at 55 Newton Road, Revenue House, Singapore 307987.
3. GIRO arrangement will be set up within 21 days.



INLAND REVENUE
AUTHORITY
OF SINGAPORE

Part 1: PARTICULARS OF APPLICANT (Fields marked with (^) are required)

Name of Taxpayer[^]

--

Tax Reference No. (NRIC/FIN/ITR)[^]

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please select the type of payment plan option[^]

*One-Time Yearly

**Monthly

Plan type will be defaulted to monthly if not selected.

My/Our Contact Details

Contact No[^]:

Email address:

*Tax payable will be deducted in one lump sum on the 6th of the month following the Notice of Assessment.

**Monthly GIRO deductions will begin once it is approved, and subsequently in May each year, to April of the following year. Please refer to IRAS' website www.iras.gov.sg for details on GIRO arrangement

- (a) I/We hereby instruct the Bank to process IRAS' instruction to debit and credit my/our account.
- (b) The Bank is entitled to reject IRAS' debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. The Bank may also at its discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
- (c) This authorisation will remain in force until terminated by the Bank's written notice sent to my/our address last known to the Bank or upon the Bank's receipt of my/our revocation.

Bank Account Details (Do not use credit card number)

Name of Bank[^]:

Account No.[^]:

Account Name as in Bank's record[^]

--

My/Our Signature(s) / Thumbprint(s)*/
Company's Stamp as in Bank's record[^]

--

Please remember to sign in this box.

*For thumbprint(s), please go to the Bank's respective branch with your identification document(s).

Date:

Part 2: FOR IRAS' COMPLETION

SWIFT BIC	Originating Bank Account
D B S S S G S G X X X	001-001464-1

Tax Reference No.

--

Please **DO NOT** use this account for any Fund Transfer to IRAS.

SWIFT BIC	Account No. to be Debited / Credited

Part 3: FOR BANK'S COMPLETION

To: IRAS

This Application is hereby **REJECTED** (please tick) for the following reason(s) :

- | | |
|-----------------------------------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> Signature/Thumbprint # differs from Bank's records | <input type="checkbox"/> Wrong account number |
| <input type="checkbox"/> Signature/Thumbprint # incomplete/unclear # | <input type="checkbox"/> Amendments not countersigned by customer |
| <input type="checkbox"/> Account operated by signature/thumbprint # | <input type="checkbox"/> Others: _____ |

Name of Approving Officer

Please delete where inapplicable

Authorised Signature

Date

Verified by IRAS