

Form No:

Date:

CHEQUE ACCEPTANCE FROM

Applicant Details			
Name:		Contact Person:	
ID/Registration No:		Contact Number:	
Current Address			
Post Code		Telephone	
Email			
Permanent Address			

Directors Details (for businesses only)			
Name	Current Address	Permanent Address	Contact No.

* All cheques are subject to realization hence the certificate will not be in force if the cheque is returned
 * If a cheque is dishonored, customer will be notified via phone / sms to rectify the issue within 3 working days
 * A written notice will be issued to the customer if the customer fails to rectify the payment issue within 3 working days
 * If customer fails to rectify the payment issue within 7 working days from the notice period, customer will be blacklisted and certificate cancelled. No further cheques will be accepted from such customers.
 * The Dishonored cheque may be returned to the customer, if the customer is willing to pay in cash or a blank guaranteed cheque.
 * Further, the company may pursue legal action against such customers

I/we hereby declare, in case of returned cheque I/we will take full responsibility to pay the amount in Full to Allied

Directors Signature

Documents to be submitted with this form
1. Copy of company registration
2. Reference Letter from Bank
3. ID card copy of Directors/Shareholders
4. ID card copy if Authorised Signatory
5. Board Resolution of Authorised Signatories

Company Stamp

For office use only
<input type="checkbox"/> Approved <input type="checkbox"/> Rejected
Approved by: _____
Signature _____
Date _____