



# INDIAN OVERSEAS BANK

64 Cecil Street, IOB Building, Singapore 049711

PHONE: 63724402 | FAX: 62244490

SWIFT: IOBASGSG

## eBank Guarantee Application Form (eGuarantee@Gov)

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*Please complete all mandatory fields. Leave optional fields blank if not applicable.*

Dear Sir/Madam,

We hereby request you to issue on our behalf an Electronic Banker's Guarantee (eBG) as provided in the below fields.

**1. Guarantee Template Reference Code:**

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*Note: Provided by Agency (e.g. GOV\_UT).*

**2. Case Reference No.:**

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*Note: Contract / License reference number from Agency.*

**3. Beneficiary Name:**

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*Note: Full name of Agency.*

**4. Applicant Name:**

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*Note: As per ACRA / NRIC / FIN.*

**5. Applicant Reference No. (UEN / NRIC / FIN):**

**6. Currency Code:**

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*Note: Use ISO format (e.g. SGD).*

**7. Guaranteed Sum:**

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*Note: Numeric only (e.g. 100000.00).*

**8. Guarantee Effective Date:**

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*Note: Format: DD/MM/YYYY.*

**9. Guarantee Expiry Date:**

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*Note: Format: DD/MM/YYYY.*

**10. Auto Extension Period (if applicable/else leave blank):**

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*Note: In days (multiples of 30, minimum 180).*

**11. Final Extension Period (if applicable/else leave blank):**

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*Note: In days (multiples of 30).*

**12. Purpose of Guarantee (if applicable):**

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*Note: Only for specific templates.*

**Declaration:**

I/We confirm that the above information is true and correct.

I/We authorize the bank to debit our account for fees, commissions & charges.

I/We agree to be bound by the prevailing general banking terms & conditions, applicable jurisdiction schedules & bank's trade services schedules & rules.

I/We request the Bank to issue an eBank Guarantee as per the above details.

Applicant Signature & Seal: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_