

**TATIL**  
 \*TATIL LIFE ASSURANCE LIMITED  
 11A, Maraval Road,  
 Port of Spain,  
 Trinidad and Tobago, W.I.  
 P.O. Box 1004  
 Tel: (868)628-2845 or (868)622-5351/18  
 Fax: (868)622-9339 or (868)628-0035  
 Web Site: [www.tatil.co.tt](http://www.tatil.co.tt)  
 E-Mail: [info@tatil.co.tt](mailto:info@tatil.co.tt)



## BANKER'S ORDER

TO: THE MANAGER FROM: \_\_\_\_\_  
BLOCK LETTERS

BANK: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

RE: Account No: \_\_\_\_\_

**PLEASE CANCEL ANY PREVIOUS STANDING ORDERS**

Please pay:

- REPUBLIC BANK LIMITED, Independence Square, Account No: 150-279-126-701
- RBC ROYAL BANK, Independence Square, Account No: 100004017839562

For the credit of TATIL LIFE ASSURANCE LIMITED the sum of \_\_\_\_\_ dollars  
 and \_\_\_\_\_ cents on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, and a similar sum on  
 the \_\_\_\_\_ day of each \_\_\_\_\_ thereafter until further notice, and debit my account above.

POLICY NUMBER	NAME	AMOUNT
In the even there is a difference of within one dollar in the amount calculated: I/we hereby authorize TATIL LIFE ASSURANCE LIMITED to make such adjustments in the block below.		<b>TOTAL \$</b>

\$

Signature: \_\_\_\_\_

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

Agent's Name: \_\_\_\_\_ No: \_\_\_\_\_

