

DE-REGISTRATION / CANCELLATION FORM

Please fill up the form and send it to csc.sg@crif.com. Kindly allow us up to 7 working days to process.

SECTION 1 : INFORMATION ON COMPANY AND REQUESTOR PERSON	NEL										
Company Name :	Account ID :										
Requestor's Name :	Contact No. :										
Email Address :	Fax No. :										
SECTION 2: DE-REGISTRATION OF ACCOUNT / USER											
De-registration for : Account and User ID(s) User ID(s) only											
Effective Date of De-registration :											
Reasons for De-registration :											
Company Winding Up / Merger Staff left	the company										
Dissatisfied with service / product Switchin	g to another ASP/ Vendor/ Internal Solution										
No longer using the service											
Other reasons : please specify :											
Please state your Account and / or User ID(s) to be de-registered :											
Account :											
User ID(s) :											



SECTION 3: AUTHORISATION

I certify that all the above information given are correct and true :

Signed for and on behalf of the Subscriber		:		C	Company Stamp	:		
Na	me & Title of Signatory	:		۵	Date	:		
IMPORTANT NOTES:								
1.	Any outstanding payments will be immediately due on confirmation.							
2.	. A confirmation email of De-registration / Cancellation will be issued. If you do not receive it after 7 working days, please							
	email us at info@bizinsights	.net						
3.	. Subscription fees for the current month is not refundable.							
SECTION 4 : FOR OFFICIAL USE ONLY								

Action By	:		Account ID	:	
		(Name / Signature / Date)	User ID	:	