

# REMITTANCE APPLICATION FORM

Transfer Type	
<input type="checkbox"/> Telegraphic Transfer	<input type="checkbox"/> Inter Bank Fund Transfer



Please fill in using **BLOCK LETTERS**  
Please "✓" where applicable.  
\* Indicates mandatory information to be provided \*

Branch \_\_\_\_\_

Date\* 

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## Applicant's Information (Sender)

Name of Sender\* \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail \_\_\_\_\_ ID / Passport No. \_\_\_\_\_

## Transfer Instructions

<p>Payment Method <input type="checkbox"/> From Account <input type="checkbox"/> Others (please specify) _____</p> <p>Currency _____ Account _____</p> <p>Debit A/C No.* _____</p> <p>Currency _____ Account _____</p> <p>Charges Debit A/C No.* _____</p>	<p><b>Please enter amount to be remitted or equivalent currency to be converted*</b></p> <p style="text-align: right;">Currency      Amount</p> <p>Remittance of _____</p> <p>In Words _____</p> <hr/> <p><b>OR</b></p> <p style="text-align: right;">Currency      Amount</p> <p>Equivalent of _____</p>
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32A	Value Date	_____
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56A	Intermediary Bank	Name _____
	Optional-for routing payment to Beneficiary Bank	Address _____
		Country _____
		Swift Code / Chips ID / Australia BSB Code / USA Fed Wire / USA ABA / UK Sort Code _____

57	Beneficiary's Bank	Name* _____
		Address* _____
		Country* _____
		Swift Code / Chips ID / Australia BSB Code / USA Fed Wire / USA ABA / UK Sort Code _____

59	Beneficiary	Name*/ Address _____
		Country* _____
		Account No*/ IBAN _____

70	Details of Payment* _____
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71\*  All local and overseas charges borne by beneficiary (**BEN**)      **OR**       All local and overseas charges borne by remitter (**OUR**)      **OR**       Local charges borne by remitter & overseas charges by beneficiary (**SHA**)

## Customer's Signature Do not write on this area

I/We authorise the bank to debit the above monies for the lawful purpose detailed above and agree to abide by the Terms and Conditions printed overleaf.

Customer's Signature

A copy of the SWIFT (MT103) is required. The charges are to be debited to account no.: \_\_\_\_\_ Please Fax to: \_\_\_\_\_