

# FOREIGN FUNDS TRANSFER REQUEST FORM



PLEASE FILL IN FORM IN CAPITAL LETTERS

Date:

## SENDER'S DETAILS

Account Name:

Address:

Phone No:  Email (for telex copy):

Debit Account No:  Debit Account No for charges:

Transfer Amount:  (In Words):

Nature of sender's business:

## BENEFICIARY DETAILS

Name of Beneficiary:

Beneficiary's address:

Beneficiary's Bank:

Beneficiary's Bank Address:

Beneficiary Bank SWIFT/BIC:

Nature of Beneficiary's business:

Should we expect similar transactions in the future Yes ☐ No ☐ Confirmation that this IS NOT a third party transaction Yes ☐ No ☐

Beneficiary's Account No./IBAN:   
(IBAN Mandatory for EUROPEAN, UK and UAE transfers)

Sort Code:  Routing/ ABA No.:   
(Mandatory for POUNDS transfers to UK): (Mandatory for US transfers)

## INTERMEDIARY BANK DETAILS (if any)

Intermediary Bank:

Intermediary Bank SWIFT/BIC:

Offshore Charges: Self ☐ Beneficiary ☐

Purpose of Payment:

Customer's Signature:  Customer's Signature:

Kindly Sign-Off All Alterations

Official Use ☐

Source of funds: Cash ☐ Inflow ☐ Others: