

Date: 26/04/22

The Branch Manager
EBIXCASH

_____ Branch

Dear Sir,

Subject: Remittance / Release of Foreign Exchange for Private Visit / Medical Treatment / Emigrations / Overseas Education / Employment / Other purposes _____ (Please Specify) (Strike out whichever is not applicable).

With reference to the above I request you to release foreign exchange for the purpose mentioned above and furnish the following details:

1. Details of Applicant / Remitter

Applicant Name: SHUBHAM AGARWAL Date of Birth: 30/08/1993
(Should be as per PAN)

Address: 143, Shahzadi Mandi, Agra

City: Agra Pin Code: 282007

State: UP Telephone No.: _____ Mobile No.: 8861164674

Email ID.: Sa2080@am.ac.uk Nationality: INDIAN

Residential Status: RESIDENT PAN No.: AU LPA 75929

Passport No.: 25917768 Date of Expiry: 28/01/30 Place of Issue: Ghaziabad

2. Details of Person on whose behalf remittance is being made only under overseas education or Medical Treatment

Student / Patient Name: _____ Passport No.: _____

PAN No.: _____ *College/ University/Hospital: _____

Academic Year: _____ City / Country: _____ Date of Travel: _____

**Relationship with the Applicant / Remitter: _____

Signature of the applicant

*copy of the letter from overseas university to be attached.

** Only Closed Relatives as per section VI of Companies Act are permitted in the case of remittance which are related to each other as Husband and wife, if they are members of HUF or they are related to each other as Father (including step Father), Mother (including step Mother), Brother (including step Brother), Sister (including step Sister), Son (including step son), Son's wife, Daughter (including step Daughter), Daughter's husband.

3. Foreign exchange amount to be released / remitted (Please provide the exact split)

Cash Currency & Amount _____ Travellers Cheque Currency & Amount _____

Card Currency & Amount _____ Draft Currency & Amount _____

TT Currency & Amount _____

Equivalent to Rs. _____ Equivalent to USD _____

Country of Travel / Remittance: _____ Date of Travel: _____

Source of Funds: _____

In case of Demand Draft

Draft Favouring _____

In case of swift / Telegraphic transfer

Beneficiary Details:

Beneficiary Name _____

Beneficiary Address _____

Beneficiary Bank Account Number _____

Beneficiary Bank Name and Address _____

Swift Code / Routing No. _____

ABA routing / BLZ / Sort Code / Bank Code: _____

Id IBAN International: _____

Additional information to the beneficiary (if available) _____

Information to be sent with wire transfer, if any _____

Correspondent Bank Charges: Beneficiary / Ours **(Strike out whichever is not applicable)**

4. # Details of the remittance made / transaction effected under the LRS in the current financial year.

(April _____ March _____) (if needed attach additional sheets in the same format)

Sr. No.	Date	FCN & Amount	Equivalent to Rs.	Equivalent to USD	Name and address of AD branch/FFMC through which the transaction has been effected

I, undertake that in case, if it is reported that I have breached the LRS limit, I will be my responsibility to bring back/surrender the amount purchased/remitted in excess of the LRS limit and thereafter I will approach RBI for compounding of contravention under FEMA 1999.

Shubham

Signature of the applicant

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Declaration cum undertaking

I, the undersigned, hereby declare that the total amount of foreign exchange purchased from or remitted through, all sources in India during the financial year as per item no. 4 of the Application, including the current transaction is within the overall limit of USD 250,000/- (USD Dollar Two Hundred and Fifty Thousand Only), which is the limit prescribed by the Reserve Bank of India for the said purpose. I certify that the source of funds for making the said remittance belongs to me and the foreign exchange shall not be used for prohibited purposes. The transaction details of which are mentioned above does not involve, and is not designed for the purpose of any contravention or evasion of the provisions of the FEMA, 1999 or of any Rule, Regulation, Notification, Direction or Order made there under. I also hereby agree and undertake to provide such information /documents as will reasonably satisfy you about this transaction in terms of this declaration. I shall be responsible and liable for any incorrect information provided by me. I agree that in the event the transaction is cancelled or revoked by me after submitting the request, any exchange losses incurred in this connection to be recovered from the refund amount. I further agree that once the funds remitted by me have been transmitted by EBIXCASH (through AD Bank) to the correspondent and/or beneficiary banks, EBIXCASH shall not be responsible for any delays in the disbursement of such funds including the withholding of such funds by the correspondent and/or beneficiary bank. I agree that once funds are remitted, intermediary bank charges may be levied by Correspondent and /or Beneficiary Banks, which may vary from Bank to Bank. I agree that in the event the transaction being rejected by the beneficiary bank because of incorrect information submitted by me, any charges levied by the beneficiary bank or exchange losses incurred in this connection, I will be liable to pay the same to EBIXCASH. I further confirm that the foreign exchange released for the above mentioned purpose will be used within 60 days of purchase. In case it is not possible to use the foreign exchange within the period of 60 days, same will be surrendered to an authorized person. I am neither a politically Exposed Person (PEP), not related to any of the Pep's. I hereby give my consent for sharing details/documents/information provided by us regards to this transaction with the AD I bank thru which remittance will be processed and for the AD I bank to use, disclose, store and/or process such Information, including for undertaking any verification, checks, authentication etc. Also to share the information with Regulator or any Law Enforcing Agencies wherever asked for as per extent Law/Rules/directions/Guidelines. I hereby state and undertake that I have no objection in authenticating myself with Aadhaar based Authentication system and hereby give my voluntary consent to EBIXCASH as required under the Aadhaar Act 2016 and all other applicable laws. In case of payment by cash I hereby declare that the aggregate value of foreign exchange purchased by me, including this particular transaction, during the last 30 days, including the present date, either from EBIXCASH or from any other Authorized Dealers, by making payment in Cash does not exceed Rs. 50,000/-.

I understand that it is mandatory for you to collect copy of my visa and ticket before release of foreign exchange and keep the same on record. In this case, the VISA will be on (i) stamped only after the endorsement of availing exchange; (ii) on arrival at the destination country; (iii) copy enclosed (~~strike off which is not applicable~~). I undertake to produce my passport to you any time after my return from trip as a proof of obtaining visa as well as undertaking the trip abroad.

Payment is made by Self Self or **Close Relative (Relation) _____ PAN _____

Payment mode: Cash / Cheque / DD / PO /Bank Transfer / RTGS / NEFT (strike off which is not applicable)

Bank Details from which payment is made

Bank Account Holder Name: SHUBHAM AGARWAL Bank ICICI

Bank Branch Trivandrum Account No. 253401500395 IFSC ICIC0002534

Cheque No./DD No./PO No./URT No./ Transfer No.: _____

Shubham

Signature of the applicant

Name: SHUBHAM AGARWAL

Signature of the natural guardian (if applicant is minor)

Name: _____

Relationship with the Applicant: _____

Certificate by the Authorized Dealer

This is to certify that the remittance is not being made by/ to ineligible entities and that the remittance is in conformity with the instructions issued by the Reserve Bank from time to time under the Scheme. I have verified KYC documents in original.

Name and designation of the authorized official:

Signature

Date

Place

Stamp / seal