

Foreign Exchange Conversion / Telegraphic Transfer Application

1) Applicant's Request					
Foreign Exchange (FX) Conversion		Telegraphic Transfer			
2) Your Business Details					
Organisation ID					
Account Name					
Debiting Account Number					
3) Foreign Exchange Conversion Details					
Convert From					
(Currency and Amount)					
Convert To					
(Currency and Amount)					
Value Date					
(Settlement Date)					
FX Rate					
Remarks					
4) Telegraphic Tran	nsfer Details				
Currency & Amount to					
Transfer					
Value Date					
Charges to be Borne By	Remitter – OUR				
	Beneficiary – BEN				
	Remitter & beneficiary – SF	HA .			
Dalait Ohamaa faana	<u> </u>				
Debit Charges from:					
Currency & Account Number					
INUITING					
Beneficiary's Account					
Number					
Beneficiary's Name					



Beneficiary's Add	Iress					
(Optional)						
Beneficiary Bank						
Beneficiary Bank	's BIC					
Intermediary Ban	ık					
Intermediary Ban	ık's BIC					
Remittance Rem (if any)	arks					
	<u>'</u>					
5) Agreement						
Where the parties bearing the charges imposed by the Bank and / or Agent Bank(s) are not expressly indicated, the Bank charges will be borne by the Applicant(s) and Agent Bank charges will be borne by the payee. In the event that the application is not made by the relevant cutoff time(s), the Applicant shall bear all costs and losses arising therefrom. This remittance application shall be subjected to the Bank's Standard Terms and Conditions Governing Accounts and Deposits, together with the applicable Local Addendum(s), Product Addendum(s) and Documentation, which may be prescribed and / or amended by the Bank						
from time to time.						
6) Author	ised Signature(s)					
I / We represent and warrant that the contents of this application (including but not limited to any and all supporting documents that are submitted together with this Application) are true, complete and accurate in all respects, and that the Bank may rely on this Application form and any supporting documents.						
Signature of Authorised Signatory		Signature of Authorised Signatory				
Name:		Name:				
Designation:		Designation:				
Date (DD/MM/YY):		Date (DD/MM/YY):				
Note: Authorised Signatory as per the board resolution.						
For Bank use only		1				
Date Received	Signature Verified By		Processed By / Date	Approved By / Date		