



FUND TRANSFER REQUEST FORM

Date

Branch Manager/OIC,

----- Branch/Uposhakha,
IFIC Bank Limited**Required Service**

- Account to Account Fund Transfer
 Real Time Gross Settlement (RTGS) (charge applicable)
 Electronic Fund Transfer (EFT) Debit Instruction* Credit Instruction

*For Debit Instruction, customer must have arrangement (written instruction or agreement) with the receiver bank

Debit Account Details

Account Name			
Account Number			
Contact Number			
Bank Name	<input type="checkbox"/> IFIC Bank Limited	<input type="checkbox"/> Other Bank (Mention Please)	
Branch name		Routing Number**	

**For EFTN and RTGS only

Credit Account Details

Beneficiary Name			
Bank Name		Branch Name	
Account Number		Routing Number**	
*Customs Office Code		*Customs Reference	
*Declarant		*Phone Number	

*Required for customs payments only

Transaction Details

Currency	<input type="checkbox"/> BDT	<input type="checkbox"/> USD	<input type="checkbox"/> GBP	<input type="checkbox"/> EUR	<input type="checkbox"/> CAD	<input type="checkbox"/> JPY
Amount (In Figure)		Transaction Time		<input type="checkbox"/> AM	<input type="checkbox"/> PM	
Amount (In Words)						
Purpose of Transaction		Reference No. (If any)				

I/We authorize IFIC Bank to initiate the Fund Transfer by debiting my/our above-mentioned account. I am/we are fully aware that this transaction is irrevocable and will be posted to the bank account mentioned in this form. I/we shall be solely liable for any error regarding wrong transaction due to inserting wrong account number as well as routing number in the above as transaction will be done within shortly. I/We also confirm that transactions under this instruction will be subject to the Operating Rules of Bangladesh Bank of Bangladesh Electronic Fund Transfer Network (BEFTN) and Bangladesh Real Time Gross Settlement (BD RTGS) as applicable from time to time.

1st Applicant's Signature**2nd Applicant's Signature**

Signature	Signature
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Name:

Name:

Bank Use Only

- Customer account information is found correct and has sufficient balance for the transaction
 Signature(s) of the customer matches with account's signature card
 Reference number entered in system (transaction details)

Initiating Official's Signature**Approving Official's Signature**

Signature	Signature
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Name:

Name:

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**Bank's Acknowledgement Slip**Date

Fund Transfer Request has been received for	<input type="checkbox"/> IFIC Account to Account	<input type="checkbox"/> EFT	<input type="checkbox"/> RTGS
Amount (In figure)	In words		
Account Number (Debit)		Account Number (Credit)	
Bank Name		Bank Name	

Bank Official's Signature

Name:
EID: