

Date:

--	--	--	--	--	--	--	--

D D M M Y Y Y Y

_____ Branch

Fund Transfer Type

NCHL-IPS

RTGS

Section 1: Fund Transfer Detail

Currency:	<input type="checkbox"/> NPR	<input type="checkbox"/> Others (Specify) _____	Amount (in Figure):	<input style="width: 95%;" type="text"/>
Amount in Words: _____				

Section 2: Purpose of Fund Transfer

<input type="checkbox"/> Customer Transfer (CUST)	<input type="checkbox"/> Remittance (REMI)	<input type="checkbox"/> Fee (FEEO)	<input type="checkbox"/> Insurance (INSU)	<input type="checkbox"/> Installment (INSM)
<input type="checkbox"/> Credit Card (CCRD)	<input type="checkbox"/> Salary Corporate (SALC)	<input type="checkbox"/> Salary (SALA)	<input type="checkbox"/> Others: _____	
Transaction Reference <End to End Id>: _____				
(Invoice/Bill No., Month, Policy No., Employee Id or any other transaction reference id)				
Other information (if any to be captured in the transaction): _____				

Section 3: Creditor Information (Beneficiary Detail)

Creditor Name:	<input style="width: 98%;" type="text"/>								
Creditor Bank Name:	<input style="width: 95%;" type="text"/>					Branch Name:	<input style="width: 95%;" type="text"/>		
Creditor Account Number:	<input style="width: 20px;" type="text"/>								

<Use separate sheet in case of transfer to multiple creditors/beneficiaries>

Section 4: Debtor Information (Applicant)

Debtor Name:	<input style="width: 98%;" type="text"/>														
Debtor Account No.:	<input style="width: 20px;" type="text"/>														
Contact Details:	Address: _____														
	Tel: _____							Mobile: _____							
	E-mail: _____														

Terms and Conditions:

- The Applicant shall be responsible for any loss, liability, expenses, and damages due to inconsistencies or incompleteness of information provided.
- The Bank will levy fees and charges to the applicant for processing of fund transfer as per the standard tariff of charges published by the bank. The customer authorizes the bank to debit his/her account for this transfer and any applicable fees/charges. However, the charges if any of the receiving bank shall have to be borne by the beneficiary.
- The fund transfer request of the customer shall be governed by the rules, regulation and circulars of Nepal Rastra Bank and other competent authority.

Self-Declaration:

- The fund for this transfer is from legitimate source for the purpose declared in this form. If found otherwise, I/We shall bear the consequences thereof and as per the prevailing law
- I/We have read and understood the terms and conditions governing fund transfer printed in the form and agree to abide by them.

_____ Applicants (Authorized) Signature (s)/ Official Stamp

For Bank's Use Only	
Received Date: _____ Applicable Fee/Charge: _____	Customer Account Debited <input type="checkbox"/> Yes <input type="checkbox"/> No
Signature Verified By _____ Name: _____ Designation: _____	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> <p>Official Stamp</p>
Approved By _____ Name: _____ Designation: _____	
	System Entered By: _____ System Verified By: _____