

JILA SAHAKARI KENDRIYA BANK MARYADIT, SIDHI (M.P.)

Branch

Date

REAL TIME GROSS SETTLEMENT/NATIONAL ELECTRONIC FUND TRANSFER

(RTGS/NEFT) APPLICATION FORM

(आरटीजीएस/एनईएफटी के माध्यम से राशि ट्रांसफर के लिए आवेदन)

(To be filled by the Applicant/Remitter In Block Letters)

(A) Details of Applicant (Remitter)

Type of Account –SB/CURRENT

To be filled by the Applicant in CAPITAL LETTERS/कृपया केपिटल लेटर्स में भरें।

- 1- Account Holder Name (खाता धारक का नाम)
- 2- Account No (खाता क्रमांक)
- 3- Contact No (मोबाइल नंबर)
- 4- PAN No (पैन नंबर) यदि रु.50,000.00 से अधिक हो
- 5- Account Holder Address (खाता धारक का पता)

(B)Details of Beneficiary (Receiver of the Funds)

- 1- Beneficiary Name (लाभार्थी का नाम)
- 2- Beneficiary Bank (लाभार्थी के बैंक का नाम जहाँ राशि भेजना है।)
- 3- Branch (लाभार्थी के बैंक शाखा का नाम जहाँ राशि भेजना है।)
- 4- IFSC CODE (बैंक शाखा का आईएफएससी कोड 11 अंक का)
- 5- Account No
- 6- Confirm Account No
- 7- Amount to be Remitted :- _____
- 8- Add: Bank Charges :- _____
Total Amount :- _____ Cheque No: _____
(Rupees _____)

We agree to abide by the Real Time Gross Settlement System (RTGS/NEFT) Guide Line/Regulation/Rules etc. Issued By Reserve Bank Of India, from to time to time and also the guidelines and or terms conditions of M.P. Rajya Sahakari Bank Maryadit, from time to time.

Applicant (Remitter) Signature

<u>FOR OFFICE USE ONLY</u>	
Debited Applicant's A/c Total Rs. _____	In Words _____
Date of Transfer _____	UTR/Remittance No _____
(1) Authorized Signatory _____	(2) Authorized Signatory _____

CONDITIONS OF THE TRANSFER

1. Remitting Bank shall not be liable or any loss of damage arising or resulting from delay in transmission delivery or non-delivery of Electronic message of any mistake, omission or error in transmission or delivery thereof or in deciphering the message from any cause whatsoever or from its misinterpretation received or the action of the destination Bank or any beyond our control.
2. All Payment instruction should be checked carefully by the remitter.
3. Message received after cut-off time will be sent on three next working day.
4. KYC documentation will be completed by Non A/C holder necessarily.

Customer copy

Branch.....

Date.....

Beneficiary Name----- Beneficiary Bank/ Branch-----

Account No----- Total Amount----- In Words-----

Date of Transfer _____ UTR/Remittance No _____