

## السيكدل مين بهالا اكاؤنث

Branch Name		Custo	omer#						
Branch Code		Date		D D	(Fo	or Bank Use	Only)	ΥΥ	
REQUEST FOR FUNDS TRANSFER / ISSUANCE OF PAYMENT INSTRUMENTS									
Please issue: Allied Banker's Cheque (A Real Time Gross Settlemen Currency PKR Amount in Figures	nt (RTGS) Fo	ll Deposit Receipt reign Telegraphio □€ Words	Transfer (F	тт)	Other	(Ple	ase specify) ase specify)		
BENEFICIARY'S DETAILS									
Name (In Block Letters):*									
ID Document No.**		Address:*							
NTN (wherever applicable):									
Telephone/ Mobile No.*									
IBAN/Account No./ Raast ID:									
Bank:		Branch Name & C	Code:						
	(Additional Information required in case of FTT)*								
SWIFT/Sort Code:	SWIFT/Sort Code: Foreign Bank / Branch Address:								
APPLICANT'S INFORMATION									
Name (In Block Letters):*	AFFLICA	T 3 INFORMATIO	JIN						
ID Document No.**									
ID Document No.** NTN (wherever applicable):		Address:*							
NTN (wherever applicable): Telephone/ Mobile No.*		Purpose of Trans	action:*						
NTN (wherever applicable): Telephone/ Mobile No.*  (Additional Inf	formation required in case o	Purpose of Trans	action:*						
NTN (wherever applicable): Telephone/ Mobile No.*	ator and Beneficiary:	Purpose of Trans	action:*	al/Interr					
NTN (wherever applicable): Telephone/ Mobile No.*  (Additional Inf Relationship between Origin	ator and Beneficiary:	Purpose of Trans f Transfer of Fund Applicant (where	action:*	al/Interr	ationa				
NTN (wherever applicable): Telephone/ Mobile No.*  (Additional Inf Relationship between Origin Details of Beneficial Owner(s	ator and Beneficiary: :) of Funds if other than the A ID Documen	Purpose of Trans  f Transfer of Fund  Applicant (wherever)	action:*	al/Interr	ationa	l Bank)*			
NTN (wherever applicable): Telephone/ Mobile No.*  (Additional Inf Relationship between Origin Details of Beneficial Owner(s Name:	ator and Beneficiary: :) of Funds if other than the A ID Documen	Purpose of Trans  f Transfer of Fund  Applicant (wherever)  t No.	action:*ds to any Localeter applicable	al/Interr e):	ationa	l Bank)*			
NTN (wherever applicable): Telephone/ Mobile No.*  (Additional Inf Relationship between Origin Details of Beneficial Owner(s Name:  CASH	ator and Beneficiary: c) of Funds if other than the A ID Documen MOD	Purpose of Trans  f Transfer of Fund  Applicant (wherever)  t No.	action:*	al/Interr e):	ationa	l Bank)*			
NTN (wherever applicable): Telephone/ Mobile No.*  (Additional Inf Relationship between Origin Details of Beneficial Owner(s Name:	ator and Beneficiary: :) of Funds if other than the A ID Documen	Purpose of Trans  f Transfer of Fund  Applicant (wherever)  t No.	action:*ds to any Localeter applicable	al/Interr e):	ationa	l Bank)*			
NTN (wherever applicable): Telephone/ Mobile No.*  (Additional Inf Relationship between Origin Details of Beneficial Owner(s Name:  CASH	ator and Beneficiary: c) of Funds if other than the A ID Documen MOD	Purpose of Trans  f Transfer of Fund  Applicant (wherever)  t No.	action:*ds to any Localeter applicable	al/Interr e):	ationa	l Bank)*			
NTN (wherever applicable): Telephone/ Mobile No.*  (Additional Inf Relationship between Origin Details of Beneficial Owner(s Name:  CASH  IBAN/Account No.***  P	ator and Beneficiary:  of Funds if other than the A  ID Documen  MOD  K A B P A  wided in this form is correct are as at my part. Further, I confin	Purpose of Trans  f Transfer of Fund  Applicant (wherever  t No.  E OF PAYMENT  CHI  and verifiable  m that I have	action:*ds to any Localeter applicable	al/Interr	el/Mob	l Bank)*			

- \* Mandatory Information
- \*\* ID Document No. & attested photocopy of Identity Document is Mandatory in case of Walk-in Customer (not applicable if transaction has been executed after biometric verification of the customer)
- \*\*\* Mandatory Information in case applicant is ABL Account Holder, regardless of mode of payment
- \*\*\*\* In case of Entity/Sole Proprietor Account, Stamp/Seal as per SS Card (where applicable)