

## NCHL-IPS Fund Transfer Form

| Branch   | Date:   |
|--|---|
| Section 1: Fund Transfer Detail  |   |
| Currency: NPR/   | Amount (in Fugure):   |
| Amount in Word:  |   |
| Section 2: Purpose of Fund   | Transfer  |
| Customer Transfer (CUST)   |   |
| ☐ Credit Card (CCRD)   |   |
|  | o End /ID>: (Invoice/Bill No., Month, Policy No., Employee Id or any other transaction referece id)                   |
| Other information (if any to be  | e captured in the transaction):   |
| Section 3: Beneficiary Info  | mation (Beneficiary Details)  |
| Creditor Name:<br>(Use CAPITAL Letters)  |   |
| Beneficiary's Bank Name:   | Branch:   |
| Beneficiary's Account Numbe  |   |
| Delichelary's Account Number   | OR  |
| Beneficiary's Code:  | Creditor Code is an IPS code provided by the beneficiaary that will suffice instead of creditor bank account details> |
| <ul> <li>Use separate sheet in case of transfer to mult</li> </ul>   | iple creditors/beneficiaries>   |
| Section 4: Sender Informat   | ion (Applicant)   |
| Sender's Name:<br>(Use CAPITAL Letters)  |   |
| Sender's Account No.:  |   |
| Contact Details:   | Address:  |
|  | Tel: Mobile: E-mail:  |
| <ol> <li>The Applicant shall be responsible for any loss, liability, expenses, and damages due to inconsistencies or incompleteness of information provided.</li> <li>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 custome 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 shll have to be borne by the beneficiary.</li> <li>The fund transfer request of the customer shall be governed by the rules, regulation and circulars of Nepal Rastra Bank and other competent authority.</li> <li>Self-Declaration:</li> <li>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 an as per the prevailing law.</li> <li>I/We have read and understood the terms and conditions governing fund transfer printed in the form and agree to abide by them.</li> </ol> |   |
| Applicant's Signature (s)/Off  For Bank's Internal Use:  Signature verified by:  | icial Stamp  Staff ID:  |
|  | Customer Account Debited:  Yes  No  |
| Applicable Fee/Charge:   | Contain VaiCad Day  |