

Date:

The Manager
Central Processing Department
National Bank of Bahrain B.S.C.
P.O. Box 106
Manama
Kingdom of Bahrain

Dear Sir,
This letter is a formal request to the Bank to effect the fund transfer instruction stipulated below:

Remitter Details

Remitter Name

Remitter Physical Address

Debit Account Number

Beneficiary Details

IBAN / Account Number

Beneficiary Name

Beneficiary Physical Address

Beneficiary Bank Name

Beneficiary Bank Address

Beneficiary Bank Swift Code

Authorized Signature

Name

Authorized Signature

Name

Authorized Signature

Name

Payment Details

Purpose of Payment Code & Description (For Regulatory Purposes)

Payment Details/Purpose

Debit Amount Currency

Debit Amount (in figures)

Debit Amount (in words)

Transfer Value Date

Transfer Charges (Shared/our)

Special Instructions (if any):

Intermediary Bank (IB) Details (Optional: Please complete the following if your bank requires the use of an Intermediary Bank)

Bank Name

Bank Address

Swift Code

Authorized Signature

Name

Authorized Signature

Name

Authorized Signature

Name

Physical Delivery Authorization (Applicable only for physical delivery and not through mailing service)

I/We authorize National Bank of Bahrain B.S.C to accept and process this payment instruction delivered to the Bank by the agent mentioned hereunder. A copy of the agent's ID/Passport is attached to this letter.

Name

ID/Passport Number

Declarations to the Fund Transfer Instruction

1. I/We confirm that the fund transfer instructions stipulated in the letter, including the IBAN of the beneficiary, provided are correct and that the Bank accepts no liability that may arise as a result of or in connection with providing erroneous information
2. I/We understand that the Bank will make the fund transfer to the IBAN/account number of the beneficiary specified above and will not verify the beneficiary's details
3. I/We understand that the messages given after cut-off time will be sent on the next batch/working day
4. I/ We confirm that the transfer is effected for legitimate business needs
5. I/We understand that the Bank shall not be liable for any loss or damage that may arise as a result of or in connection with delay in transmission or any mistake, omission, or error in transmission or delivery thereof or in deciphering the message for any cause whatsoever or the misinterpretation or the action of the destination bank or any act beyond its reasonable control
6. All fields are Mandatory. Applications shall be rejected in case of missing details.

Authorized Signature

Name

Authorized Signature

Name

Authorized Signature

Name