

Branch Name: _____ Branch Code: _____ Date:

You are requested to remit the proceeds as per details below through RTGS ☐ / NEFT ☐ (Tick ☒ the appropriate box)

Attaching Cheque No: _____ for Rs. _____

Beneficiary Details	
Beneficiary Name	
Beneficiary Account Number	
Confirm Beneficiary Account Number	
Beneficiary Address	
Beneficiary Bank Name & Branch	
Beneficiary Bank IFSC Code	Account Type Resident <input type="checkbox"/> / Non Resident <input type="checkbox"/>
Amount (in figures) to be credited	
Amount (in words) to be credited	

Remitter Details	
Remitter (Applicant) Name	
Remitter Account Number	
Cash Deposited (Non slice SFB Customer)	NEFT Amount Rs: _____ Fee Rs. _____ Total Amount Rs: _____
Mobile/Phone Number of Remitter (Mandatory)	Email Id: _____
Address of the Remitter (Mandatory for Non slice SFB Customer)	
Remarks	

Terms & Conditions

- I/ We hereby authorize slice SFB to carry out the RTGS ☐ / NEFT ☐ transaction as per details mentioned above (Tick ☒ the appropriate box)

KYC documentation done by
(only for Non-slice SFB Customers)

Signature of Authorized Signatory	1st Signatory	2nd Signatory Please affix stamp wherever applicable	3rd Signatory
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Branch Use Only			Branch Stamp Date & Sign
UTR No			
Transaction ID			
Entered by	Employee Code	Signature	
Verified by	Employee Code	Signature	
KYC documentation done by (only for Non-slice SFB Customers)	Employee Code	Signature	

Customer Acknowledgement

Received application for RTGS ☐ / NEFT ☐ for an amount of Rs. _____ vide cash/ cheque number _____ to be credited to

Account Number: _____ of _____ Bank with IFSC Code _____ Customer will be guided by the Terms and Conditions mentioned in the form. slice SFB will accept no liability for any consequences arising out of erroneous details provided by the Customer.

Date: _____

Time: _____

Branch Stamp & Sign:
