

RTGS / NEFT Transaction Request Form

KMBL Bank, _____ Branch.

Date: _____

Please remit the funds as per the enclosed annexure-I by debiting the below mentioned account along with your service charges and applicable taxes on such remittance/s

Applicant (Remitter) details:

Account Name: _____ Account Number: _____ Cheque Number: _____

Total Amount: _____ Total Number of Instructions: _____

I/We declare that I/we am/are authorized to request the Kotak Mahindra Bank (herein after referred to as Bank) for availing RTGS/NEFT Facility and authorized to operate the above mentioned account , as per the present mode of operation, to present the RTGS/NEFT funds transfer application to Bank. I/We undertake to keep Bank informed of any changes in the mode of operation of any of the above accounts.

I/We hereby confirm that the Beneficiary Bank/ Branch participate in RTGS/NEFT. I/We hereby confirm the correctness of the details provided for RTGS/NEFT like beneficiary/ies name/s, account number/s, IFSC code/s of the beneficiary/ies Bank/s Branch/es. I/We am/are aware that as per RBI guidelines the credit to the beneficiary/ies account/s for interbank-Third party payments will happen only on the basis of account number provided. I/We am/are aware that the Bank will get the valid discharge if the amount is credited to the beneficiary/ies account number/s as requested in RTGS/NEFT application and the Bank shall not assume any liability arising out of incorrect IFSC code, beneficiary account number/s, mismatch in the beneficiary/ies name/s including but not limited to mismatch in the spelling.

I/We hereby confirm having read, understood the term & conditions pertaining to RTGS/NEFT facility on http://www.kotak.com/bank/terms-and-conditions/terms_20.htm(hereinafter referred to as "Terms and conditions") and agree that use of the RTGS/NEFT facility shall be subject to and be governed by the Terms & Conditions

I/We are aware & accept the fees and/or other charges which are currently to be levied by the Bank for providing access to or allowing the use of the RTGS/NEFT facility. I/We further undertake to keep ourselves aware of any revision made by Bank of the fees and/or any other charges levied for providing access to or allowing the use of the RTGS/NEFT facility. I/We are aware that the same shall be notified to us by hosting the same on http://www.kotak.com/bank/terms-and-conditions/terms_20.htm

Signature/s of Account Holder/s(signature along with stamp will be required for non-individual customer/s):

1. _____

2. _____

3. _____

For Branch Use Only 1. Applicant's Signature/s verified _____ 2. Amount of FT Rs. _____ 3. Bank Charges Rs. _____ 4. Total Amount Rs. _____ 5. Amount debited to A/c.: _____ Sign and Employee Code.: _____ Date & Time : _____ _____ (AUTHORISED SIGNATORY)	Transaction entered as per details of Beneficiary given above. Sign and Employee Code.: _____ _____ (MAKER)	Transaction authorised & Funds remitted through RTGS/NEFT as per details of Beneficiary given above 1. UTR/REF No.: _____ _____ (Signature & Employee Code of Checker) Date & Time: _____
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Acknowledgement

Received application from _____ A/c. No. _____ for Rs. _____ on _____ - _____ - _____ at

_____ - _____ am/pm for funds transfer under RTGS/NEFT as per the terms agreed between the Customer and the Bank on ____ / ____ / _____ as detailed below:

Beneficiary Name _____ City: _____

Bank: _____ Branch: _____ A/c Type & No.: _____

Seal & Signature: _____ Code : _____

ANNEXURE-I

Please select (✓) one option (Mandatory) : NEFT RTGS

Sr. No.	Full Name of Beneficiary	Beneficiary A/C No.	Amount	Beneficiary Bank Details	IFSC Code	Contact details of beneficiary & Details/Purpose of Payments (maximum 140 characters)
1		Beneficiary A/c no. _____ _____ Re-confirm beneficiary A/c no. _____ _____	Amount in figures _____ _____ Amount in words _____ _____ _____	Name of Bank _____ City _____ Branch _____ _____		
2		Beneficiary A/c no. _____ _____ Re-confirm beneficiary A/c no. _____ _____	Amount in figures _____ _____ Amount in words _____ _____ _____	Name of Bank _____ City _____ Branch _____ _____		
3		Beneficiary A/c no. _____ _____ Re-confirm beneficiary A/c no. _____ _____	Amount in figures _____ _____ Amount in words _____ _____ _____	Name of Bank _____ City _____ Branch _____ _____		

Signature/s of Account Holder/s(signature along with stamp will be required for non-individual customer/s):

1. _____ 2. _____ 3. _____

KMBL/Apr-2015/V1.0