



SGD & FOREIGN CURRENCY FUND TRANSFER FORM

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Please bring this completed form and your NRIC / passport to any of our Maybank branch.

Section One- Application Particulars

Applicant Name(s) :	
NRIC/Passport No./ Business Registration No.:	

Section Two- Instruction Details

Date : / /

To : MALAYAN BANKING BERHAD, BRANCH ("Bank")

I/We hereby authorise the Bank to debit my/our account and perform the following fund transfer:

Debiting Account Details	Crediting Account Details
Account Name: <input type="text"/>	Account Name: <input type="text"/>
Debiting Maybank Current/Savings Account Number: <input type="text"/>	Crediting Maybank Current/Savings Account Number: <input type="text"/>
	Currency: <input type="text"/>
Transferring Currency & Amount	
Currency:	Amount:
Applying rate	
(Please tick <input checked="" type="checkbox"/> the relevant boxes)	
<input type="checkbox"/> Please use the prevailing board rate as per date of transfer	
<input type="checkbox"/> Please use the special/contract rate: <input type="text"/> , quoted by/ contract no.: <input type="text"/>	
<input type="checkbox"/> Not applicable (conversion not required)	

Section Three- Customer Authorisation

By providing the information in this application form (and any other information that I/we may provide to you from time to time in connection with Maybank products and services):

Where I/we have submitted the personal data of third parties to Maybank in this form, I/we confirm that I/we have obtained the consent of these third party individuals for the collection, use and disclosure of their personal data to you, for the purpose of processing the request(s) stated in this form.

Signature Name:	Signature Name:
NRIC / Passport No.:	NRIC / Passport No.:

FOR BANK'S USE		
Attended and signature verified by: (Bank Staff name & PF No/ Signature/Date)	<u>Checklist</u> (if applicable):- <input type="checkbox"/> Photocopy identification/passport documents <input type="checkbox"/> Contract reference	Transaction & FITAS done by: FX Reference No: Approved by:

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