

**RTGS FUNDS- TRANSFER APPLICATION FORM**

*Date:*  
*Time Of Request*

**The AGM/Senior Branch Manager,  
SyndicateBank  
..... Branch.**

**Dear Sir,**

**Applicant (Remitter) Details: TO BE FILLED IN UPPER CASE ONLY**

<i>Name of the Applicant:</i>	
<i>Account Title / Cheque No.</i>	
<i>Debit Account No.</i>	
<i>Account Types</i>	<i>Savings / Current / Overdraft</i>

**Beneficiary Details:**

<i>Beneficiary Name</i>	
<i>Credit Account No.</i>	
<i>Centre (Location)</i>	
<i>Bank</i>	
<i>Branch</i>	
<i>Account Type</i>	<i>Savings / Current / Overdraft</i>
<i>IFSC Code</i>	

**Remittance Details:**

<i>Amount (in figures)</i>	
<i>Amount (in words)</i>	
<i>Remarks / narration*</i>	

**\*Should not exceed 150 characters including spaces in between words**

**Please remit the amount as per the aforesaid details, by debiting my/our account for the amount of remittance plus your charges. I/We undertake to keep SyndicateBank informed of any changes in the mode of operation of any of the above accountsI/We certify that the Proceeds of RTGS are not being credited to any NRE Account.**

**Further, I agree that the credit to the Beneficiary account shall be accorded on the next day if the Beneficiary Bank/Branch is closed on account of any reason. I hereby agree that the Bank will not be held responsible for unexecuted RTGS Request for the reasons beyond the control of SyndicateBank or Reserve Bank of India or both.**

**I/We hereby confirm having read and understood the terms & conditions pertaining SYNDICATE BANK 'Syndinstant' facility.**

*Yours sincerely,*

**(Signature of authorised person with seal)**

<b>For Bank's Use Only</b>	
<b>Date &amp; Time of Request</b>	
<b>Account Debited by</b>	
<b>Debit Authorised by</b>	
<b>Entered into RTGS</b>	
<b>Authorised into RTGS</b>	