

Date: DD / MM / YYYY

The Head of Branch

Bank Asia PLC.



_____ Branch/Center/Window

Account Information

Account Number: _____ Account Title: _____

A. Issuance of Document: Kindly issue the following document(s) as indicted below:

<input type="checkbox"/> A/C Statement	From <u>DD / MM / YYYY</u> to <u>DD / MM / YYYY</u>
<input type="checkbox"/> Certificate	<input type="checkbox"/> Solvency Certificate in BDT/ FCY <input type="checkbox"/> Balance Confirmation Certificate in BDT/ FCY <input type="checkbox"/> Inward Remittance Certificate <input type="checkbox"/> Sanchaypatra Issuance/Investment Certificate <input type="checkbox"/> Foreign Currency Encashment Certificate <input type="checkbox"/> Loan Outstanding Certificate <input type="checkbox"/> Others (Please specify) _____
<input type="checkbox"/> Tax certificate	Financial Year _____/ _____ <input type="checkbox"/> DPS/FDR <input type="checkbox"/> SB/CD/SND A/C <input type="checkbox"/> SP Interest/Tax Certificate <input type="checkbox"/> Others _____

B. Service Request (s): Kindly execute the following service request(s).

<input type="checkbox"/> Fund Transfer (within Bank Asia PLC)	Beneficiary A/C Number: _____ Beneficiary A/C Name: _____ Amount (in figure): _____ Amount (in words): _____ Justification: _____	
<input type="checkbox"/> Pay Order Issuance	Mode of Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Debit Link A/C _____ <input type="checkbox"/> Cheque No. _____ Date _____ Amount in Figure: _____ Amount in Word: _____	Beneficial Type: <input type="checkbox"/> Individual <input type="checkbox"/> Govt. Institute <input type="checkbox"/> Non- Govt. Institute Beneficiary: _____ Address: _____ _____ Contact No. _____ Purpose: _____
<input type="checkbox"/> Pay Order Cancellation	Pay Order Number: _____ dated _____ favoring _____ Amount (in figure): _____ Credit A/C No. _____ Justification: _____	
<input type="checkbox"/> Debit Card	<input type="checkbox"/> New Issuance <input type="checkbox"/> Replacement	
<input type="checkbox"/> Internet Banking	E-mail ID: _____ Customer ID: _____	
<input type="checkbox"/> Cheque Issue	Containing _____ Leaves	
<input type="checkbox"/> Stop Payment	Cheque Leaf(ves) No. _____	
<input type="checkbox"/> Positive Pay	Chq. No. _____ Amt. _____ Date: _____ Fvg: _____	
<input type="checkbox"/> Others (Please specify)	_____	

C. Collection Authorization: Please arrange to provide the following(s) to the Bearer:

<input type="checkbox"/> Collection Authorization	Cheque Book _____ leaves <input type="checkbox"/> FD Receipt <input type="checkbox"/> A/C Statement <input type="checkbox"/> Tax Certificate <input type="checkbox"/> Balance Confirmation Certificate <input type="checkbox"/> Sanchaypatra Script <input type="checkbox"/> Return Cheque (Ch. No: _____ Issuing Branch _____) <input type="checkbox"/> ATM Card <input type="checkbox"/> NOC <input type="checkbox"/> Pay Order, Amount Tk. _____ PO No. _____ <input type="checkbox"/> Others (Please specify) _____
Bearer's Details	Name: _____ Mobile No.: _____ Signature: _____ Signature of A/C Holder for Attestation: _____

I/We have authorized the above instructions. I/We hereby declare that all details provided in this form are true and correct and are supported by valid documents enclosed with this form.

Signature of 1st Applicant

Signature of 2nd Applicant

For Bank Use Only

<input type="checkbox"/> All the information stated above and customers' signature has been checked and verified. All relevant supporting documents have been obtained as per bank's policy.		
<input type="checkbox"/> Signature Verified	Physical Presence <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Callback Confirmation: Contact No: _____ Date & Time: _____
		Charge realized: <input type="checkbox"/> Yes <input type="checkbox"/> No Tk. _____

Initiating Officer's Signatue with Seal

Approving Officer's Signature with Seal