State Bank of India
Maldives Operations

OFFICE USE ONLY	
Amount:	
Rate:	
Comm:	
P&T:	
Total Comm:	
Total Debit:	
Remit ID:	

APPLICATION FOR REMITTANCE

SENDER DETAILS

Debit Account No.		* USD account only	
Full Name			
NID/WP No.		Passport No.	
Nationality		Mobile No.	

TRANSACTION DETAILS

Send To	☐ India - INR	☐ Nepal - NPR	☐ Bangladesh - BDT
Remit Amount (figures)			
Amount in Words			
Bank Charges	☐ Included in the amount above	☐ In addition to the amount above	
Purpose of Remittance	☐ Family Support	☐ Medical	☐ Education
	☐ Payment for Services	☐ Other, please specify: _____	

BENEFICIARY DETAILS

Account No.	
Full Name	
Bank Name	
Branch Name	
IFSC / SWIFT Code	

DECLARATION & DEBIT AUTHORITY

It is understood that the online/swift transfer is being affected by me/us at our risk and that the Bank or its agent will not be held liable for any delay, omission, commission or mistake arising in transmission or misinterpretation of message at the destination. I/We certify that all details provided above are complete and correct. I/ we confirm that the above transaction is for genuine purpose and that the applicant/remitter does not relate to any banned entity as per US OFAC guidelines for USD remittance. In case the US Treasury authority block/not release the fund, I/we will not hold State Bank of India responsible for any loss that may be caused to us. I/we further authorise the Bank to debit my / our abovementioned account with the amount of remittance in equivalent with applicable bank charges / commission.

Signature:
Name: _____

Date: D D M M Y Y Y Y

FOR BANK USE ONLY

Form Received By	Entered By	Approved By
Signature:	Signature:	Signature:
Name: _____	Name: _____	Name: _____
Date: _____	Date: _____	Date: _____

v.26.11